

Arapahoe County Department of Human Services Intake Evaluation Final Report

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Arapahoe County Department of Human Services Intake Evaluation Executive Summary

Introduction

In May 2022, a former Arapahoe County Department of Human Services (ACDHS) Social Caseworker was criminally charged with felony attempt to influence a public servant and misdemeanor false reporting of child abuse. The Colorado Department of Human Services (CDHS) conducted a multi-faceted independent review of the Social Caseworker's activities during her employment with the county. To assess whether other activities were fraudulent and to ensure child safety, CDHS's Administrative Review Division (ARD) performed an independent review of all referrals made by the Social Caseworker, a paper review and random sample review of contacts entered into Trails (the statewide Comprehensive Child Welfare Information System that contains casework information) as completed by the caseworker, to determine whether the scope of this fraud was isolated or more of a pervasive issue with this Social Caseworker. In addition to the fraud review, the Division of Child Welfare (DCW) within CDHS conducted a review of the Social Caseworker's caseload as well as related incidents brought forth through the CDHS complaints process to identify and address any potential child safety issues or practice issues.

Due to the urgency and need to efficiently identify potential safety issues, CDHS's review was limited in scope. Because of this, and because of the complexity of the allegations against the Social Caseworker and concerns that arose about supervision and oversight based on the review of practice to date, CDHS determined that an additional layer of external review of county practice was necessary to more broadly and deeply assess case practice and supervision related to intake practices in child welfare. CDHS staff led and directed the review/audit into child welfare practice but supplemented with outside contracted evaluation consultants to review work, provide input and suggestions, and assist in developing a summary of overarching findings and recommendations. The evaluation consultants were directly engaged in every aspect of the evaluation, along with CDHS and ACDHS.

The purpose of the evaluation was to conduct an analysis of work assigned to areas of supervision that were revealed as concerning from CDHS' first round audit, to determine strength of performance in accordance with rule and best practice, and to make recommendations to enhance performance. This looks similar to the work DCW staff conducted to evaluate child safety on assessments previously audited, and aligns with statements in the recent CDHS Audit Summary report regarding concerns about the level of supervision on certain cases. Using a random sample of assessments, the goal was to help determine if these concerns were pervasive or limited. Furthermore, the evaluation consultants collaborated with CDHS staff on integrating results from a verification of a random sample of contacts from assessments conducted in a six month period into the report findings and conclusions.

Methods

The evaluation design was mixed method (quantitative and qualitative) featuring a review of key decision points from a random sample of child welfare assessments, interviews of 30 staff involved in assessment activities (caseworkers, supervisors, intake administrators, and managers) from the Child and Adult Protection Services Division (Division), analyses of aggregate outcome data reflecting county

performance, and examination of county and state information regarding practice, policy, and procedure for administration, supervision, casework, workload, training, staff evaluation, and documentation.

The assessment review process was designed to evaluate decision points and competency of decisions made in assessments using casework documentation, administrative data, court records, and appropriate collateral information. The assessment review template was developed in collaboration with and approved by ARD staff. For this review, assessments closed within a recent three month time frame were selected. The three month time frame was selected so that the assessments would reflect current practice. Thus, Arapahoe County assessments with a supervisor closure approval date between October 1, 2022 through December 31, 2022, were identified as the primary universe for the review sample.

For the Division staff interviews, a purposeful sampling approach was used in which the Division Manager identified a cross-section of 18 caseworkers and six supervisors in the intake unit. The evaluation consultants requested that the sampled caseworkers include newer and more veteran staff across numerous supervisory teams, while all available intake supervisors were sampled. All four intake administrators were interviewed in addition to the Section Manager and Division Manager.

Based on relevant outcome metrics and performance measures that reflect systemic change, the evaluation compared current versus past operational performance and Division operations versus other peer counties using data provided by the DCW Research, Analysis, and Data (RAD) team.

Conclusions

The CDHS audit of the Arapahoe County Department of Human Services that began in July 2022 identified potential concerns about caseworker and supervisor practice consistency, oversight, and accountability. This comprehensive third-party evaluation including an assessment review, outcome analyses, staff interviews, and document review found **no pervasive agencywide practice issues that indicate systemic lapses to protect children or serve families**. Furthermore, the second contact review from the CDHS Administrative Review Division found **no evidence of systemic concerns of falsification of contacts**. Additionally, a record of CDHS activity with ACDHS over the past four years was reviewed and revealed no major safety concerns related to casework, supervision, or staffing. The findings demonstrate that **ACDHS is actively working to address identified intake challenges through supervisory strategies aligned with the best practice literature**. Specifically, the Division has:

1. Hired, onboarded, matched, and trained new caseworkers and supervisors to overcome the high staff turnover that had increased caseloads and supervisor to caseworker ratios
2. Developed new policies, procedures, and practices to improve timeliness and responsiveness to family needs
3. Increased supports for caseworkers and raised expectations and accountability of supervisors and administrators in reviewing casework practice
4. Enhanced Division oversight by using data to manage staff performance and inform practice

5. Restructured the Division and engaged in intentional change management to strengthen the culture and climate

There are measurable impacts from these actions as evidenced by the **upward trend in timeliness of initial response, assessment closure, and safety assessment completion during the past year**. Most notably, the Division has accomplished these improvements in the aftermath of a major leadership change, the COVID pandemic, social unrest in Aurora, and sustained media scrutiny.

The evaluation surfaced many opportunities for growth and areas that could benefit from continuous quality improvement as ACDHS continues to enhance its practice. Following are a sampling of recommendations that emerged from the evaluation:

- Reclaim the identity of Arapahoe County as leaders in innovative practice centered around Partnering for Safety and Differential Response (DR).
- Implement the move back to group supervision (a DR practice model component) and case consultations (a Partnering for Safety practice model component) as a way to fully integrate the practice models into casework and to maximize the sharing of expertise and oversight between intake staff.
- Elevate the discussion of family history and timely completion of the Colorado Family Safety Assessment tool during the assessment process.
- Refine expectations of supervisors in such areas as providing documentation days, offering protected time for removals, and allowing flex time when staff are required to work overtime.

Several recommendations also emerged from the evaluation for ways that CDHS can collaborate with Arapahoe County and other Colorado counties to enhance intake practice.

- Staff identified concerns related to the timely completion of the Colorado Family Safety Assessment tool. CDHS could address this issue by working with counties statewide to improve the usability of the tool.
- Staff indicated challenges in meeting the current Review, Evaluate, Direct (RED) Team requirements and how this affects other essential functions. The State Board of Human Services has recently changed rule regarding RED Teams, which should provide more flexibility to counties and add more value to the RED Team process.
- Staff identified that the Child Welfare Training System (CWTS) Academy training is challenging to integrate into practice. The upcoming update of the initial certification training should allow for more timely transfer of learning activities. CDHS also could work with CWTS to further explore strategies for embedding knowledge translation and hands-on learning into the training process.
- CDHS and CWTS can collaborate on developing training opportunities that are essential to caseworker readiness, along with offering training during the most applicable timeframes and most accessible delivery modalities (e.g., in-person and virtual), so that training is easier for caseworkers to absorb and retain.

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1. Introduction

In May 2022, a former Arapahoe County Department of Human Services (ACDHS) Social Caseworker was criminally charged with felony attempt to influence a public servant and misdemeanor false reporting of child abuse. The Colorado Department of Human Services (CDHS) conducted a multi-faceted independent review of the Social Caseworker's activities during her employment with the county. To assess whether other activities were fraudulent and to ensure child safety, CDHS's Administrative Review Division (ARD) performed an independent review of all referrals made by the Social Caseworker, a paper review and random sample review of contacts entered into Trails (the statewide Comprehensive Child Welfare Information System that contains casework information) as completed by the caseworker, to determine whether the scope of this fraud was isolated or more of a pervasive issue with this Social Caseworker. In addition to the fraud review, the Division of Child Welfare (DCW) within CDHS conducted a review of the Social Caseworker's caseload as well as related incidents brought forth through the CDHS complaints process to identify and address any potential child safety issues or practice issues.

Due to the urgency and need to efficiently identify potential safety issues, CDHS's review was limited in scope. Because of this, and because of the complexity of the allegations against the Social Caseworker and concerns that arose about supervision and oversight based on the review of practice to date, CDHS determined that an additional layer of external review of county practice was necessary to more broadly and deeply assess case practice and supervision related to intake¹ practices in child welfare. CDHS contracted with evaluation consultants, Dr. Marc Winokur, Judy Rodriguez, and Corey Johnson, to conduct an independent, third-party evaluation of ACDHS intake policies, procedures, and practices. The evaluation consultants met the following experience requirements and qualifications: (1) Extensive knowledge of Colorado's child welfare system, its regulations, and accepted best practices; (2) Administrative and practice experience as demonstrated by field work, certification and/or a suitable substitute; (3) Strong engagement and adaptive skills; and (4) Strong qualifications and experience in agency reviews and academic evaluation.

1.1. Goal of Work

The purpose of the evaluation was to conduct an analysis of work assigned to areas of supervision that were revealed as concerning from CDHS' first round audit, to determine strength of performance in accordance with rule and best practice, and to make recommendations to enhance performance. This looks similar to the work DCW staff conducted to evaluate child safety on assessments previously audited, and aligns with statements in the recent CDHS Audit Summary report regarding concerns about the level of supervision on certain cases. Using a random sample of assessments, the goal was to help determine if these concerns were pervasive or limited. Furthermore, the evaluation consultants

¹ Intake is the process used for accepting referrals from the Colorado Child Abuse and Neglect Hotline that meet criteria for potential child abuse or neglect. Once the referral is given to intake, then an assessment of the child and the family's ability to safely care for the child occurs.

collaborated with CDHS staff on integrating results from a verification of a random sample of contacts from assessments conducted in a six month period into the report findings and conclusions.

1.2. Scope of Work

CDHS staff led and directed the review/audit into child welfare practice but supplemented with outside contracted evaluation consultants to review work, provide input and suggestions, and assist in developing a summary of overarching findings and recommendations. The evaluation consultants were directly engaged in every aspect of the evaluation, along with CDHS and ACDHS. The evaluation consisted of the steps listed below:

1. An entrance conference with all parties to introduce staff, explain the reason for the evaluation, discuss, develop, and preliminarily agree upon the scope of the evaluation, review the process and schedule, establish procedures for gathering information, review compliance standards, and answer any questions from participants.
2. Reviewing confidential case information, including but not limited to Assessment and Case records, decision points and competency of decisions made, court records, and appropriate collateral information.
3. Interviewing staff, supervisors, administrators, and leadership.
4. Comparing current versus past operational performance and comparing operations versus other agencies as appropriate. Any relevant metrics that would reflect systemic changes to be provided by CDHS and/or the County Department to the evaluation consultants for the team's review and integration.
5. Co-developing and providing preliminary findings to include practice and operational strengths and areas for improvement, if any.
6. Co-developing and providing information and recommendations regarding challenges as to how they may affect the County Department.
7. Co-leading an exit conference related to the County Department's response and CDHS' input regarding the initial evaluation report.
8. Drafting a final report with findings and recommendations. The report will address all aspects of the review, including portions primarily led by CDHS.

2. Methods

The evaluation design was mixed method (quantitative and qualitative) featuring a review of key decision points from a random sample of child welfare assessments, interviews of 30 staff involved in assessment activities (caseworkers, supervisors, intake administrators, and managers) from the Child and Adult Protection Services Division (Division), analyses of aggregate outcome data reflecting county performance, and examination of county and state information regarding practice, policy, and procedure for administration, supervision, casework, workload, training, staff evaluation, and documentation.

2.1. Primary Data Collection

Primary data collection consisted of individual and group interviews with caseworkers, supervisors, intake administrators, and managers from ACDHS. The interviews were conducted in person at the ACDHS offices in Aurora and by Zoom.

2.1.1. Interview Questions

The following are the interview questions asked of Division caseworkers, supervisors, intake administrators, and managers.

Caseworkers

1. Please describe the training you have received for your position. What additional training would you like to have?
2. Please describe the supervision you receive. How would you assess the support you receive from your supervisor?
3. Please describe the documentation requirements for your position? What are the challenges and supports of your documentation work?
4. Please describe your philosophy/values/practices with keeping children safe and family engagement?
5. Please describe the Division climate/culture. What are your ideas to improve the climate/culture?

Supervisors

1. Please describe the training you have received for your position. What additional training would you like to have?
2. Please describe the supervision you receive. How would you assess the support you receive from your intake administrator?
3. How do you promote critical thinking of caseworker work?
4. Please describe the supervision you provide to your caseworker team. How do you balance assuring policies and procedures are followed with the daily demands of getting the job done?
5. Please describe your philosophy/values/practices with keeping children safe and with family engagement?
6. Please describe the Division climate/culture. What are your ideas to improve the climate/culture?

Administrators/Managers

1. How do you assure policies (state or county) are followed by the individuals you supervise?
2. Do you evaluate if supervisors are using a blend of administrative, training and supportive or activities to expand critical thinking in supervision with their staff?

3. Please describe the changes in the Division in the past 18 months (staffing, policies, accountability, support for the position).
4. What tools do you use (e.g., data or performance measures) to help you in your leadership responsibilities?
5. Please describe the training you have received for your position.
6. Please describe the supervision you receive.
7. Please describe your philosophy/values/practices with keeping children safe and family engagement?
8. Please describe the Division climate/culture. What are your ideas to improve the climate/culture?

2.1.2. Interview Sampling

A purposeful sampling approach was used in which the Division Manager identified a cross-section of 18 caseworkers and six supervisors in the intake unit. The evaluation consultants requested that the sampled caseworkers include newer and more veteran staff across numerous supervisory teams, while all available intake supervisors were sampled. All four intake administrators were interviewed in addition to the Section Manager and Division Manager.

Across the 18 caseworkers interviewed, the average time in the caseworker position was three years with a median of two years and a range from less than one year to 18 years. The average time with Arapahoe County also was three years with a median of two years and a range from less than one year to 18 years. Two of the caseworkers were scholars (Master of Social Work (MSW) stipend students) and one was still a Caseworker A (entry-level caseworker).

The six supervisors interviewed ranged in tenure in their current position from one year to nine years with an average of four years, and with Arapahoe County from one year to 23 years with an average of 12 years. The supervisors all took different paths to their current position, but all served as intake caseworkers previously, with some also serving as permanency² caseworkers. The supervisors currently supervise between 6-7 intake caseworkers including a mix of caseworker types. The supervisors also serve on a variety of task forces and workgroups in areas such as human trafficking, crossover youth, domestic violence, diversity, equity, and inclusion (DEI), best practices, and institutional care.

The four intake administrators have been in their position for an average of one and half years with a range from one to two years, and with the county for an average of 18 years with a range of 12 to 23 years. The intake administrators had served as hotline screeners and supervisors, case aides and caseworkers, and intake supervisors before assuming their current position. The intake administrators supervise between four and five supervisors. The intake administrators are primarily responsible for caseworker performance, personnel management, workload management for supervisors and

² Permanency is the process of working with parents to assure child safety and well-being whether the child is at home receiving services, living with relatives, or living in a licensed or certified out of home placement approved by the court. The focus is usually on reuniting the child with the family unless the family is not able to care safely for the child, then permanency may be established with a relative or other appropriate caregiver.

caseworkers, filing of Dependency and Neglect (D&N) cases, data-driven supervision for assessment closure, timeliness of initial response, and safety assessment completion. The intake administrators serve on a multitude of task forces and workgroups within and outside of the county including domestic violence, DEI, juvenile assessment center, Colorado's Round 3 Child and Family Services Review (CFSR) Program Improvement Plan (PIP), adult protective services (APS), mandated reporting, and Collaborative Management Program (CMP), to name a few. The intake administrators have additional roles including coaching, addressing community/family complaints, conducting internal reviews, staff hiring and retention, and serving as field supervisors for MSW interns.

The Section Manager has been in the position for two years but with the county for 15 as a lead caseworker, adolescent permanency supervisor, and intake administrator. The Section Manager supervises the four intake administrators and reports directly to the Division Manager. The Section Manager oversees the hotline, APS and child protective services (CPS) intake, and community development/prevention, although the latter responsibility will soon go to a new Section Manager. The Section Manager is accountable for Division efficiency, effectiveness, best practices, and outcomes with a focus on meeting community expectations/needs through outreach, education, and service provision to prevent child maltreatment. The Section Manager also participates in community trainings, community partner meetings, the Child Protection Task Group, the Differential Response Leadership Council, Colorado Human Services Directors Association (CHSDA) and APS Sub-Policy Advisory Committee (Sub-PAC)³.

The Division Manager has been in the position for two years with over 28 years in the county as a hotline caseworker and supervisor, intake case aide, caseworker, supervisor, and administrator, and community development and prevention administrator. The Division Manager has extensive knowledge of working within county systems, and connections with the National Child Welfare Workforce Institute and child welfare experts on safety-organized practice provides access to the latest information about how best to manage personnel. The Division Manager is an expert in child protection and child welfare, liaising in various roles to assure a voice for improvement in areas that have significant impact on county staff.

2.1.3. Qualitative Data Analysis

The staff interviews were voluntary and all of the data collected were confidential and not shared with ACDHS or CDHS. The interviews were not recorded and the evaluation consultants each typed notes during the interviews. The notes were then combined into one master note document for each interview (group or individual). The qualitative data were then analyzed using constant comparative analysis to generate thematic findings across the main evaluation domains including training, supervision, workload, casework practice, accountability, and Division culture/climate.

³ Sub-PAC is a group of state and county experts that report to the Policy Advisory Committee (PAC). The PAC was created by CDHS to provide a formal forum for counties and the state to work together to make recommendations to the CDHS executive director about policy changes that improve service delivery for children, families, and adults throughout Colorado.

2.2. Secondary Data Collection

Secondary data were collected from Trails, Human Services (HS)Connects and Integrated Case Management (ICM) (Arapahoe documentation systems), and the Results Oriented Management (ROM) system.

2.2.1. Administrative Data

Staff from the CDHS Administrative Review Division (ARD) provided data from Trails for the assessment review. These data were supplemented with documentation from HSConnects and ICM provided by the ACDHS data analyst. Staff from the DCW Research, Analysis, and Data (RAD) team provided outcome metrics and performance measures from the ROM system.

2.2.2. Supplemental Materials

The following supplemental materials were requested and received from Arapahoe County:

1. County organizational chart
2. County generated metrics related to CPS assessment/case practice (Arapa-Stat)⁴
3. Relevant county generated supervisor or caseworker templates
4. Performance evaluation templates for supervisors and caseworkers
5. Full-time equivalent (FTE) and current numbers of intake caseworkers and supervisors
6. Caseworker/supervisor workload/caseload data
7. Protocol for locating required parties/victim (reasonable efforts template)
8. Protocol for cross-reporting (e.g., law enforcement, other counties)
9. Assessment closure procedures (closure summary)
10. New policies
11. Arapahoe County Education (ACEs) and intake training curricula
12. Change management frameworks
13. Best practices models
14. Re-organization process
15. Strategic Plan
16. Staff well-being framework

The following supplemental materials were requested and received from CDHS:

1. State activity with ACDHS over the past four years in the areas of intake, assessment, staffing, or personnel concerns
2. ARD Assessment Reviews of County over past five years
3. Any rule waivers granted to County by the State over the past five years
4. Training curricula for supervisor certification/caseworker initial and re-certification

⁴ Arapa-STAT is a performance management process launched by the Arapahoe County Department of Human Services in 2013 that is focused on real-time data and performance goals.

5. Supervisor/Caseworker certification/training impacts from COVID
6. County performance on C-Stat⁵ Measures

2.3. Best Practices Literature Review

A literature scan was completed to identify supervision best practices from research conducted over the past 15 years. Articles were accessed and reviewed on supervision topics including measurement, oversight, decision-making, caseworker perceptions, and caseworker, supervisor, and system impacts. The identified best practices are integrated throughout the report and are used to support recommendations for intake practice enhancement.

3. Division Context

Colorado has a state-supervised and county-administered human services system. Under this system, county departments are the main provider of direct child welfare and other social services to Colorado's families, children, and adults. To situate the evaluation, it is important to understand both the historical and current context of the Arapahoe County community and ACDHS. The Division Manager provided an overview of this context with a focus on recent community/Division history, Division needs, actions taken during the past 18 months under their leadership, along with the vision for the next 18 months.

3.1. Division History

The county faced tumultuous times from December 2020 to January 2021 with the aftermath of COVID and social unrest in Aurora (e.g., Aurora Police Department and DHS building was boarded up). The Division was challenged with significant staff turnover and vacancies (estimated at 50 positions) and a frayed organizational culture with strained staff/management relationships. This stressful environment was exacerbated by the resignation of the previous Division Manager. However, there were practice concerns prior to the Division Manager leaving (e.g., practice model drift), which was illustrated by lagging performance measures (e.g., missing C-Stat and Arapa-Stat benchmarks). Furthermore, collaboration between the county and the 11 local law enforcement jurisdictions was made difficult by a change in police policy for taking direct referrals and inconsistent notification to police by child welfare caseworkers. This may have resulted in police departments going out on fewer cases which led to the police being called less. Lastly, due to the high turnover, limited training, and large volume of referrals, an all hands-on deck approach across the Division was used for a limited time to assure appropriate responses to referrals to address child safety.

Arising from these challenges, needs arose at all levels of the Division. For administrators, there was a need for enhanced training, increased support, more structure, greater clarity in expectations, and better communication of policies. Based on the needs, several administrators were deemed to be more suited to other positions and were released from their administrative roles. For supervisors, there was a need for more structured supervision (e.g., spot checks) and greater consistency in practice including

⁵ C-Stat is a performance-based analysis strategy that allows every program within the Colorado Department of Human Services to better focus on and improve performance outcomes.

sufficiently verifying information and adequately identifying performance problems for caseworkers. For caseworkers, there was a need for more balanced caseloads and workloads, increased adherence to policies, procedures, and rules, and improved relationships with the courts to support safety efforts.

3.2. Division Change Management

There is policy and practice engagement at the administrative, supervisor, and caseworker levels. The Division Manager has long-standing relationships with county and state partners, which has allowed for the deployment of staff to provide the ACDHS voice as best practice experts in such statewide groups as the Child Fatality Review Team (CFRT),⁶ Human Trafficking Task Force, Child Protection Task Group, and Crossover Youth⁷ Workgroup, to name a few. Having staff in these venues has kept the Division Manager on the pulse of what is working, what is coming in terms of changes for community partners, and what areas could be impacted by establishing new policies and procedures. The Division Manager also appears to continuously scan the environment to assure a positive work culture for staff at all levels, align Division practice with state policy, improve performance and outcomes, implement the ACDHS strategic plan, and address consumer complaints.

To activate this policy and practice engagement, the administrators use the Awareness, Desire, Knowledge, Ability and Reinforcement (ADKAR) change management model. Administrators use case examples (often negative examples) to promote change using this model. For example, with a child fatality case, the administrators examine the **awareness** of caseworkers on predictive indicators for fatalities and how they are considered in casework decisions. The administrators then have to assess if caseworkers have the **desire** to make the change on their own, or do they need to write a policy. Basically, a choice between guidance and support, or “laying down the law.” They want staff to have **knowledge** of Volume 7, and work to ensure that they are staying on top of all rules and regulations. To address the **ability** to enact change, administrators offer technical support and live supervision. Specifically, they use the teach-back method⁸ to ensure caseworkers are making the change. For **reinforcement**, they spot check the casework, such as checking if law enforcement is being notified during the assessment. Administrators also look at provider outcomes and review the same cases to see if the changes are being made. If not, they continue the change management process for that particular practice.

3.3. Division Actions and Vision

Over the past 18 months under the current Division Manager’s leadership, a raft of actions have been taken to address the needs presented from the historical challenges for the Division. First and foremost, a strategic planning process was put in place to reflect family and community voice while incorporating caseworker input into the future of the Division. The strategic plan is centered on enhancement of the 3

⁶ The Child Fatality Review Team reviews incidents of fatal, near fatal, or egregious abuse or neglect determined to be a result of child maltreatment, when the child or family had previous involvement with the child welfare system within the last 3 years.

⁷ Crossover youth are youth involved in both the juvenile justice and child welfare systems.

⁸ The teach-back method (adapted from the health field) is a way of checking understanding by asking patients to state in their own words what they need to know or do about their health.

P's: Partnership, Process, and Practice. The following details the enhancement strategies for the Division:

PARTNERSHIP ENHANCEMENT

- Mutual respect
- Shared accountability
- Support
- Connection

PROCESS ENHANCEMENT

- Clear structure and consistency in casework, supervision and leadership
- High quality and effective training with required trainings towards re-certification hours
- Implementation of continuous quality improvement and quality assurance process
- Fidelity to practice models
- Achieve positive outcomes

PRACTICE ENHANCEMENT

- Think critically and use clinical discernment
- Improve casework and supervision skills with a focus on safety of children and at-risk adults as well as increased engagement for safety
- Have a holistic lens and approach to serving families
- Increase the depth of our knowledge and awareness of the totality of our cases
- Coach and develop our staff towards improved practice

A huge emphasis was placed on recruitment, hiring, and retention highlighted by increased advertising, more competitive salaries and benefits, and greater flexibility for remote and hybrid work environments. The Division underwent a reorganization with prevention programs moved to the intake unit, the addition of new Section Managers and the hiring of two Quality Assurance (QA) staff. Division processes were refined including increased structured supervision, exploration of predictive indicators of performance issues, tracking of all complaints (e.g., worked with Child Protection Ombudsman of Colorado to identify potential issues and to set goals), advanced analysis of Division performance using county data analysts, and robust tracking of performance measures and federal PIP goals (e.g., permanency, timeliness to closure). Underlying this reorganization effort was a renewed commitment to Division policies around seeing kids (Seen-Assessed-Safe), holistic assessments, effective transfer of cases, increased partnership with county attorneys and ensuring appropriate legal oversight of cases, and reinforced adherence to Division values such as commitment to safety-focused practice, storytelling through data, and building relationships with other counties to facilitate peer learning and sharing.

To facilitate these changes, the Division designed and implemented curricula for individualized training for caseworkers to supplement their Child Welfare Training System (CWTS) Academy training, and reinforced training on Volume 7 rules. Additionally, there was an enhanced focus for supervisors on accountability, problem identification, and trusting but verifying (parallel process with families).

Additionally, best practice models for staff well-being, leadership, peer learning, and complaint reviews were instituted. Lastly, intake administrators were given responsibility for hiring and engaging in a matching process between supervisors and new caseworkers with the expectation that supervisors will adapt to staff needs.

The Division Manager articulated the Division vision for the next 18 months. Again, strategic planning is first and foremost, with the Executive Director helping to set the course for the Division. Further reorganization of the Division is on the horizon with the addition of a third Section Manager for child welfare services and a reduction in the supervisor to caseworker ratio from 1:6 to 1:5.

Additional practice enhancements are planned including new performance evaluation measures, live supervision, load leveling with managers, revised evaluation tool for performance calibration, QA opportunities for documentation integrity and practice fact-checking, and a renewed focus on staff well-being through enhanced supervision and leadership. Lastly, there will be a continued emphasis on improving performance in timeliness of assessment closure through deeper dives into assessment history.

4. Assessment Review

This assessment review process was designed to evaluate decision points and competency of decisions made in assessments using casework documentation, administrative data, court records, and appropriate collateral⁹ information. The assessment review template (displayed in Appendix A) was developed in collaboration with and approved by ARD staff.

4.1. Assessment Review Methods

For this review, assessments¹⁰ closed within a recent three month time frame were selected. Closed assessments were selected because all relevant documentation would be completed for the review. The three month time frame was selected so that the assessments would reflect current practice. Thus, Arapahoe County assessments with a supervisor closure approval date between October 1, 2022 through December 31, 2022, were identified as the primary universe for the review sample. The sample was extracted from Trails on January 3, 2023. On January 3, 2023 Arapahoe County had 1,241 assessments documented as closed in Trails between October 1, 2022 – December 31, 2022.

Using the software SPSS, a random sample was extracted from the Trails system. Using a 90% confidence level with a 10% interval, and a 70% response distribution. A sample size of 55 assessments was determined to be required for review. As it was anticipated that an assessment may be ineligible for review at the time of review, a 15% oversample was provided. Ultimately, only one assessment was not eligible for review because it was for a Program Area 4 Youth in Conflict case, so one of the assessments

⁹ Collaterals are parties other than families involved in a child welfare assessment or case (e.g., attorneys, teachers, Court Appointed Special Advocates).

¹⁰ An assessment is an investigation of alleged child maltreatment and a family or caregiver's capacity and willingness to ensure child safety.

from the oversample was reviewed. The application of this sampling technique means that if the entire population was reviewed, the results would be consistent with the findings of this review 90% of the time (with a margin of error of 10%).

4.2. Assessment Review Criteria

To assure the safety of vulnerable children, Colorado Revised Statutes (19-3-308) requires that county departments of human services respond to known or suspected incidents of abuse or neglect. Concerns about children, called referrals, undergo a review to determine the appropriateness to assign for assessment. Examples of incidents received may be as follows:

- Requests for information or referral (I&R) for other services such as Medicaid, food stamps, mental health or other community services
- Concern that a child is not safe such as a child playing at a park without parental supervision
- Concerns that a child has been subjected to abuse due to observable bruising or cuts
- Worries that a child is being neglected because they haven't shown up to school for several days and the absences aren't excused
- Law enforcement is responding to a public call and determines department intervention is needed due to the presence of children

When these types of calls (known as referrals) are received, the county department determines if an immediate response is appropriate, whether there is a need for RED (Review, Evaluate, Direct) Team¹¹ review for further screening, and/or the appropriateness for a referral to prevention services. All the activities that occur must be approved by a supervisor at each decision point of the process. Immediate responses require that a caseworker or sometimes a supervisor observe the child within 8 hours and determine actions needed to assure child safety. Depending on the circumstance, these actions are developed hand in hand with the parents or relatives of the child. If the referral goes to the RED Team, then the RED Team determines the time in which a caseworker must contact the child, either 3 calendar days or 5 working days, whether the referral can be treated as a FAR (Family Assessment Response)¹² or HRA (High Risk Assessment)¹³ and the caseworker or team to which the referral is assigned.

No matter how a referral that is approved for assessment is classified, caseworkers are required to complete myriad activities to meet Federal legal requirements, State statute and regulatory requirements, and ACDHS policy expectations. The very first line of Federal Statute (ASFA Section 101

¹¹ RED Team is a group decision making process and tool used for gathering, organizing and analyzing information related to the children and families involved in child welfare cases.

¹² FAR is the alternative track in child welfare for referrals that are low- to moderate-risk accepted reports of child maltreatment. The focus is on partnering with families to provide services that meet their needs while dismissing the labels of perpetrator and victim and removing the determination or finding that is often required by statute.

¹³ HRA is the traditional track in child welfare in which an investigation is required to make a determination or finding of child maltreatment for cases with a child fatality, near fatality, or egregious incident determined to be the result of abuse and/or neglect, institutional abuse, and intrafamilial sexual abuse.

(a)) sets the tone for the country: “The child’s health and safety shall be the paramount concern.” Some of the activities that caseworkers must complete within prescribed timeframes include:

- Determining that the child is safe
- Interviewing everyone in the home, including the alleged perpetrator as well as any non-custodial parents. The purpose of the interview is to establish the actions leading to the referral and the things the parents will do to keep children in the home safe.
- Interviewing collaterals including professionals involved with the family such as school personnel or law enforcement as appropriate.
- Completing the Colorado Family Safety Assessment tool¹⁴ and Colorado Family Risk Assessment tool¹⁵ with parents, assisting parents or relatives in securing services as needed, and evaluating the services the family may already be receiving.
- Making a determination with their supervisor if the assessment is ready for closure or additional assistance or oversight is needed. The assessment is prepared for closure or transfer to the permanency team due to a need for ongoing monitoring or additional support.
- Documenting all contacts and conversation in Trails, and seeking supervisory approval at identified points.

4.3. Assessment Review Findings

The assessment review ratings are displayed in Appendix B. The following summarizes the findings for each key decision point.

Question #1: Was the referral appropriately assigned in accordance with Volume 7?

Overall, 96% of referrals were found to have the appropriate assignment decision (screen in vs. screen out) AND the appropriate response time (immediate, 3-day, or 5-day). The two referrals identified as not being assigned appropriately were found to have the appropriate assignment decision, but not the appropriate response time (they were determined to not need an immediate response when they appeared to meet criteria for one). Of the 55 assessments reviewed, 67% of the referrals had a RED Team. Of the 33% not having a RED Team, the most prevalent reason was volume of referrals received. The results for this decision point appears to indicate accuracy in assignment decisions and response times made outside of RED Teams.

Question #2: Were all required parties interviewed?

The Person Responsible for Abuse or Neglect (PRAN) in the assessment was found to have been interviewed 89% of the time. Of those PRANs not interviewed, 50% refused to be interviewed. Non-custodial parents¹⁶ were interviewed 70% of the time with some parties refusing to be interviewed.

¹⁴ The Colorado Family Safety Assessment tool in Trails guides a caseworker and family through the safety assessment process.

¹⁵ The Colorado Family Risk Assessment tool in Trails guides a caseworker and family in determining the current risk to the safety of the child.

¹⁶ Non-custodial parent is a parent who does not have primary physical custody of his/her child(ren).

Based on staff interviews, positive and diverse practice was noted in meeting the requirement of contacting non-custodial parents. Some caseworkers made repeated telephone attempts while others texted and emailed. Still other staff achieved success by contacting relatives to assure phone numbers were correct and to seek guidance about the best way to contact the parent. Across all assessments, the common theme was that several attempts were made to interview through text messages or phone calls, although attempts would stop after three or four with no other means of attempt (e.g., home visit).

Question #3: Were reasonable efforts made to interview the alleged victim?

Reasonable efforts were made in 96% of the assessments with only two children being seen outside of the required response time. Two additional referrals were determined to have merited an immediate response, so the response time would not have been met, however these are still included because of how they were originally assigned.

Question #4: Were reasonable efforts made to locate the alleged victim(s) before an “unable to locate” determination was made?

Reasonable efforts to locate the alleged victim(s) before making an “unable to locate” determination was not applicable in 53 of the 55 assessments (96%). It was completed in the two applicable assessments.

Question #5: Were referrals to Law Enforcement documented if there was an allegation of sexual abuse, human trafficking, or the PRAN is a third party?

This decision point was applicable in 26 of the 55 assessments. **For the 26 applicable assessments, referrals to law enforcement was documented 100% of the time when there was an allegation of sexual abuse, human trafficking, or the PRAN was a third party.** However, there was some inconsistency in the location of the information, as some documentation was in the Law Enforcement tab in Trails and other documentation was found in Record of Contact (ROC) notes¹⁷ or closing summaries.

Question #6: Is the level of intervention appropriate (e.g. referral to supportive services, open to a case, removal), given the documented level of safety and risk?

The level of intervention was determined to be appropriate in 85% of the assessments reviewed. Six assessments were classified as high risk in the risk assessment, but were determined to not have an appropriate level of intervention due to not having a documented family engagement meeting as required by rule.

¹⁷ ROC notes include required documentation of all monthly contacts between the caseworker, children/youth, and caregivers.

Question #7: Based on the documentation, did the county's overall finding match the definition of founded, unfounded, or inconclusive?

Overall, 23 of the reviewed assessments were assigned as High Risk Assessment and **96% of those were found to match the definition of the overall finding**. One assessment had conflicting or incomplete information about whether child maltreatment occurred and should not have been considered decisively unfounded.

4.4. Assessment Review Strengths

There were numerous identified strengths from the assessment review.

- The key decision points were well supported and documented for appropriate assignments of referrals, interviewing of required parties, reasonable efforts to locate and interview the alleged victim, documentation of referrals to law enforcement, appropriateness of intervention level, and assessment finding.
- The majority of assessments had detailed Record of Contact (ROC) notes. Where the ROC notes were lacking, the information was represented in the closing summaries. The Division provides detailed instructions and examples to caseworkers on how to complete the closing summary.
- Many interviews with families noted how the family identifies from a race/ethnicity perspective, which is important as the county moves forward with DEI work.
- According to the staff interviews, intake administrators may review history during supervision to determine if a referral represents a chronic issue for the family. Intake administrators also may review history during the closure summary process and when there is a removal or placement. Sometimes history is reviewed retrospectively after something happens, but there is intent for the new QA team to be more proactive in this area.

4.5. Assessment Review Challenges

Although the assessment review yielded overall positive findings, the following represents opportunities for growth in the assessment process.

- Although there was accuracy in RED Team decisions overall, not all required referrals had the benefit of the RED Team process. This challenge should be addressed with the new rule change that provides counties with greater flexibility in this area.
- Family history regarding prior referrals and assessments was appropriately recorded in the RED Team review as well as in the assessment closure summary. Caseworkers should ensure they are engaging the family at all levels of the assessment including discussing history as it relates to the current referral.
- There is a need for more consistent practice on the required elements for a family meeting when the risk assessment is scored as high. In the assessment review, there was incomplete documentation for some high risk assessments regarding family meetings, although supervisor

interviews indicated that most assessments have at least one caregiver present at discussions about next steps, which qualifies as a family meeting by rule.

- When a forensic interview is being conducted by the caseworker, it is required to document the type and severity of injuries to a child, if applicable.

4.6. Assessment Review Recommendations

The following are practice recommendations that emerged from the assessment review:

1. The Colorado Family Safety Assessment tool should be regularly completed and approved by a supervisor within 14 days of observing the child/youth. Caseworkers should ensure consistency and applicability by completing and documenting the tool with the family.
2. Expectations for consistent use of family history in assessments should be raised. Caseworkers discussed the importance of starting work with families with a clean slate. Although this is important for engaging families, it also is important that family history is considered to identify potential risk and safety concerns.
3. Any issues related to high risk referrals and the required use of family engagement meetings documented in the Consultation and Information Sharing Framework (Framework)¹⁸ should be identified and addressed.
4. Existing resources could be utilized to conduct interrater reliability reviews of assessments to identify any inconsistencies and level of information gathering by teams (e.g., family history, courts) utilized in the decision making process.
5. Basic compliance for rule and practice expectations were met for 5-day response time assessments, however earlier outreach during the timeframe may be beneficial for engaging families.

5. Outcome Metrics and Performance Measures

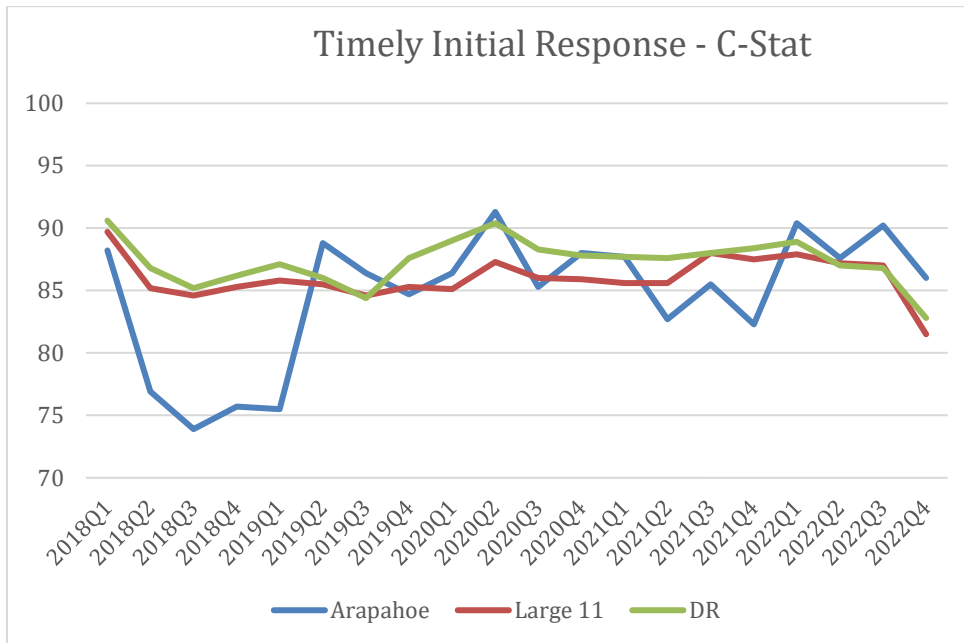
Based on relevant outcome metrics and performance measures that reflect systemic change, the evaluation compared current versus past operational performance and Arapahoe County operations versus other peer counties using data provided by the RAD team from C-Stat and the ROM system.

5.1. Timely Initial Response

As displayed in Figure 1 on the following page, **Arapahoe County increased their timely initial response (as measured by C-Stat) from 82.3% in 2021 Q4 to 86.0% in 2022 Q4.** This placed them ahead of the balance of Large 11 and Differential Response (DR) counties (excluding Arapahoe) in meeting the state defined timeframes for initial response.

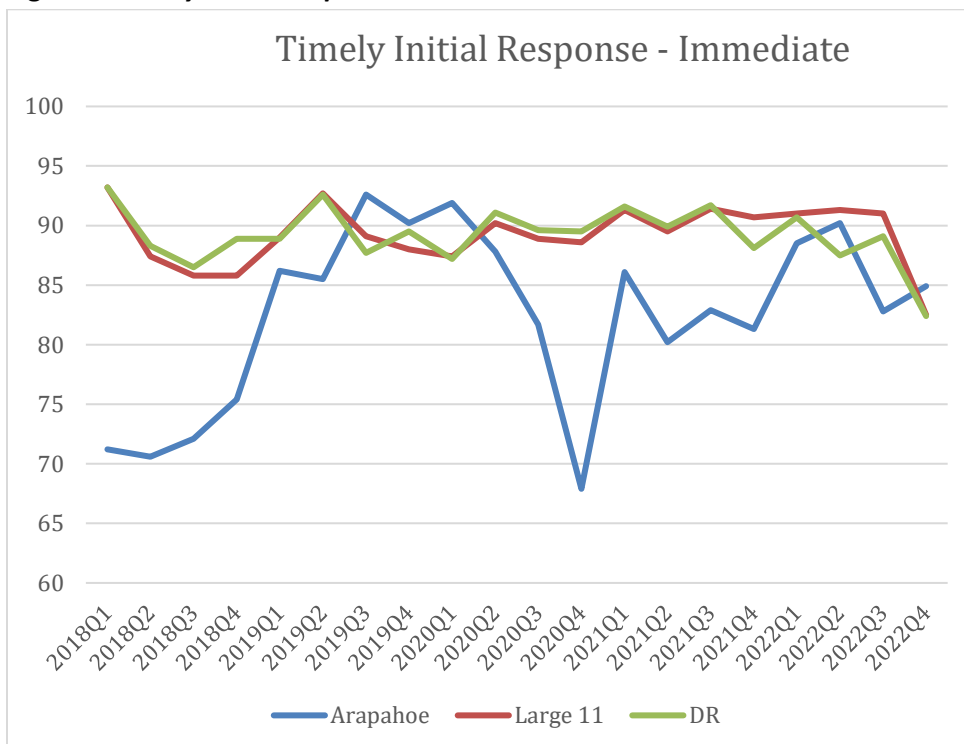
¹⁸ The Framework allows those involved in meeting about or with the family to define what the worry is about including past harm and complicating factors; what is working well including actions of protection and strengths; and what needs to happen for future safety, including future dangers, safety goals and next steps for future safety.

Figure 1: Timely Initial Response – C-Stat Measure



As displayed in Figure 2, **Arapahoe County increased their timely initial response for immediate assessments from 81.3% in 2021 Q4 to 84.9% in 2022 Q4.** This placed them ahead of the balance of Large 11 and DR counties (excluding Arapahoe) in meeting the state defined timeframes for timely initial response for immediate assessments.

Figure 2: Timely Initial Response – Immediate

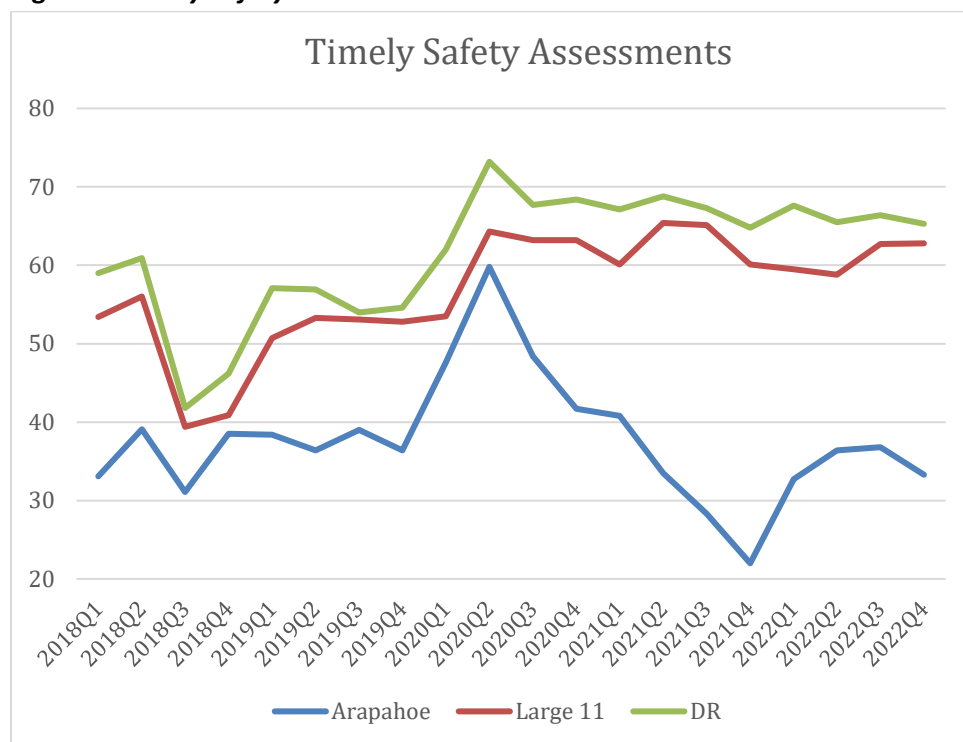


5.2. Timely Safety Assessments

As displayed in Figure 3, **Arapahoe County increased their timely completion of the Colorado Family Safety Assessment tool within 14 days of observing the child/youth from 22.0% in 2021 Q4 to 33.3% in 2022 Q4.** Even with the large year-to-year increase, they still lag behind the balance of Large 11 and DR counties (excluding Arapahoe) in meeting the state defined timeframes for this performance measure.

Further analysis reveals that the average time from assessment start to caseworker submission of the Colorado Family Safety Assessment tool decreased from 39 days in 2021 Q4 to 33 days in 2022 Q4, potentially explaining the increase in the performance measure during this time. However, the average of 33 days to caseworker submission is still considered high, which may explain why Arapahoe County lags behind its peer counties on this measure. The average time for the difference in days between the supervisor approval and completed date of the Colorado Family Safety Assessment tool remained consistent between 13 and 19 days for the 2022 timeframe.

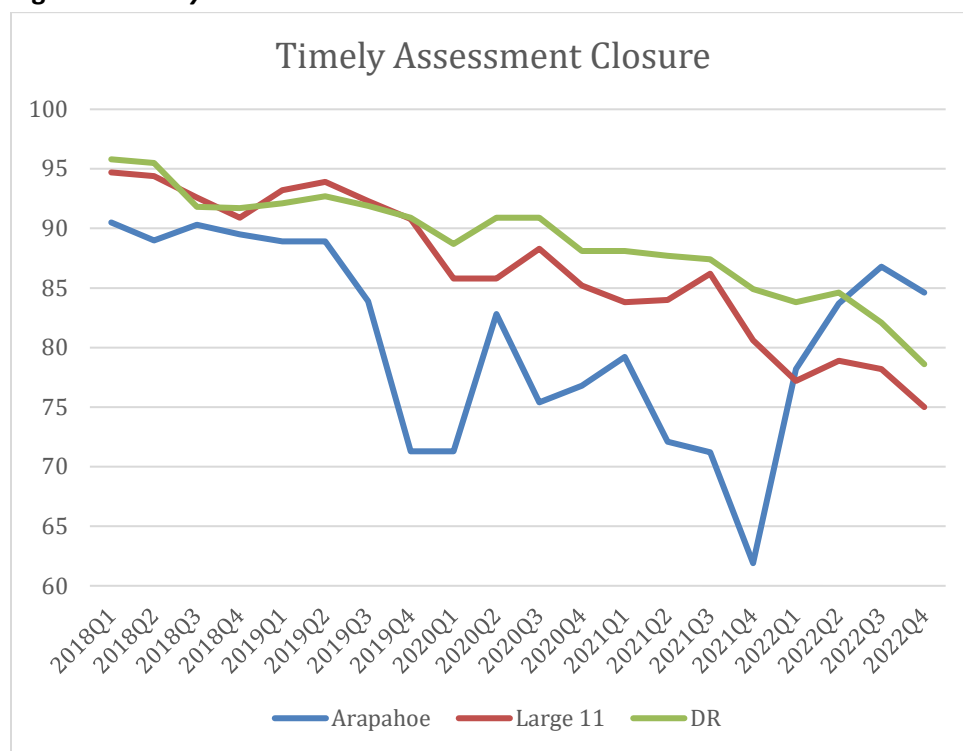
Figure 3: Timely Safety Assessments



5.3. Timely Assessment Closure

As displayed in Figure 4 on the following page, **Arapahoe County increased their timely assessment closure from 61.9% in 2021 Q4 to 84.6% in 2022 Q4.** This placed them ahead of the balance of Large 11 and DR counties (excluding Arapahoe) in meeting the state defined timeframes for timely assessment closure.

Figure 4: Timely Assessment Closure



5.4. Recurrence of Abuse

As displayed in Figures C1-C5 in Appendix C, **Arapahoe County had higher no recurrence of abuse rates than the balance of Large 11 and DR counties (excluding Arapahoe) from 2018-2021.** Starting in 2021 Q1 this outcome metric began to decline and was below that of the other peer counties in 2022 Q4.

5.5. Contacts

As a second phase of the CDHS engagement with Arapahoe County, the ARD conducted a review to verify contacts on referrals with a referral date of October 1, 2022 through January 10, 2023, that were accepted for assessment and were still open on 1/11/2023 (the date the sample was pulled). This broader review was designed to provide an assessment for systemic concerns for falsification of contacts entered into Trails by Arapahoe County staff. The complete report is included in Appendix D. In summary, **of the 95 contacts reviewed, 100% were verified as having occurred and the summary of the contact in Trails was supported.**

5.6. Outcome Metrics and Performance Measures Strengths

Arapahoe County has shown increases in timeliness of initial response, timeliness of Colorado Family Safety Assessment tool completion, and timeliness of assessment closure in the last year, which may reflect the impact of the organizational restructuring and practice changes occurring in the Division. The county also has had consistently strong performance in the recurrence of abuse outcome metric. The

second contact review from ARD also shows that there is no evidence of systemic concerns of falsification of contacts.

5.7. Outcome Metrics and Performance Measures Challenges

Arapahoe County has struggled since 2018 with the timeliness of the Colorado Family Safety Assessment tool performance measure. Based on administrator interviews, the lack of consistent knowledge, education, and direction in filling out the tool is problematic and caseworkers are challenged to find good examples to help in completing their assessments. Another barrier is that the tool is thought to be somewhat confusing to complete. As a result, the county is putting together enhanced education to address any training gaps.

Documentation and approval of the Colorado Family Safety Assessment tool by a supervisor in Trails is required no later than 14 calendar days from the date the alleged victim child(ren)/youth was interviewed or observed. Arapahoe County caseworkers are typically collecting the required information and integrating it into conversations with families and others within this timeframe. However, caseworkers are sometimes delayed in documenting the Colorado Family Safety Assessment tool in Trails, which impacts the timeliness metric. Since caseworkers are collecting the data in a timely fashion, just not documenting it timely, child safety is not compromised because the information is still being used with families during the assessment.

5.8. Outcome Metric and Performance Measures Recommendations

Arapahoe County should continue to monitor these outcome metrics and performance measures to determine if the organizational restructuring and practice changes are sustainable over time. The timely completion of safety assessments should be a Division priority to ensure that the performance comes more into alignment with benchmarks and peer county performance. The recent decline in performance for the recurrence of abuse outcome metric should be examined with an eye toward potential practice enhancements in this area.

6. Training

Staff were asked to reflect on their training experiences both external with the CWTS Academy and internal with Arapahoe County Education (ACEs), and to share their perceptions on ongoing training opportunities and interests in additional training for their positions. The following are mandatory trainings for all Division managers, administrators, supervisors, caseworkers, and support staff.

1. Drug Testing 101: Sobriety Monitoring Training
2. Fatherhood Training
 - What Fathers Face in Child Welfare Echo Series
 - Safe & Together: Working with Men as Parents
3. Counsel for Child Training
4. Arapahoe County ADAAA Training

5. Mandated Reporter Training (Child Abuse/Neglect)
6. Mandated Reporter Training (Adult Abuse/Neglect)
7. Culturally Humble Casework: Learning From Those You seek to Help
8. Substance Abuse Training
9. Training provided by an expert in the Muslim Community
10. Domestic Violence Training
11. All Children All Families
12. Harassment Prevention Training

Additionally, managers, administrators, and supervisors are required to take Human Services Family Medical Leave Act (FMLA) Training, Coaching Skills for Leaders, Partnering for Safety Refresher training, and Harassment Prevention for Managers - State and Local Government Edition. New supervisors are required to take Sleep Tight, the Kids Are Alright: Supervisory Practice to Prevent Serious Harm, Child, Family & Tribe: Bringing Indian Child Welfare Act (ICWA) to Life, Storytelling Through Data: Utilizing Data for Balanced and Engaged Supervision Confidentiality, and National Incident Management System (NIMS) 200 & 700.

6.1. Academy Training

Overall, caseworkers report that the CWTS Academy offers a broad, generalized, overview of casework, policies, and rules. Among other topics, caseworkers are trained on (1) Hotline and RED Team practice; (2) Safety through Engagement facilitation; (3) Fundamentals of Practice Simulation; and (4) Documentation. Supervisors are trained on Supportive, Educational, and Administrative supervision.

The primary concern voiced by caseworkers is that there is too much information provided (“information overload”), which makes it hard to remember and retain all of the specifics (e.g., legal information). While the information makes sense in the moment, the biggest challenge for caseworkers is that they struggle to apply the learnings right away, which then requires refreshers on topics such as removals, timelines, and documentation in Trails. Furthermore, caseworkers feel that some of the training is not in depth enough for the specifics of the job and the day to day reality of casework. Caseworkers report that the “real” training comes when they are out in the field, as they struggle to relate the Academy training to the different dynamics and complexities of each case. Experience before the Academy is deemed important to provide caseworkers with the necessary context before starting the work. Home visiting experience gained from internship placements or shadowing also are thought to be beneficial.

All of the supervisors received the Supervisor Academy training through CWTS with most believing it provides a good introduction and framework and offers a holistic perspective of the work including areas supervisors may see and examples of difficult situations. However, the supervisors noted that while helpful, the Supervisor Academy floods them with information, but does not necessarily teach the day to day of supervising, which is important since “they don’t know what they don’t know.” Additionally, several supervisors would like to see new content and techniques offered in the Academy training.

6.2. County and Ongoing Training

Caseworkers expressed appreciation for the ACEs training in connecting them with interagency supports outside of intake and helping them identify resources for families. However, there are some limitations with ACEs from the caseworker perspective. Most notably, they view it as less valuable for learning how to work with families. Relatedly, they think it is not specific enough for intake and that the generalist approach makes it tough to decipher intake/permanency differences. Another noted challenge is that caseworkers are instructed how to do an assessment and documentation in the ACEs training, but sometimes receive different feedback from supervisors when doing it in practice.

Caseworkers pointed to Human Resources (HR) mandated training through Arapahoe Learns and options on the CWTS website as avenues for ongoing training on topics such as interpreting drug test results, requirements for case transfer to permanency, DEI work, and crucial accountability. Caseworkers reported that the county sends out training announcements and reminders, but some noted challenges with scheduling trainings due to limited availability, options, and workload considerations, which makes it hard to reach the 40 hour per year requirement.

Supervisors have to complete 40 hours of training annually to maintain their certification and discussed numerous trainings available to them. They appreciate Partnering for Safety, Emotional Intelligence training, and 7 Habits of Highly Effective People to assist them in dealing with different personalities and seeing the world through their view. Supervisors also reported receiving ongoing training including Crucial Accountability, Getting Back to Basics, Motivational Interviewing, Sleep Tight, Data-informed Supervision, Effective Documentation, Fatherhood Engagement, and HR trainings on drug policy, compensation, and American with Disabilities Act (ADA) compliance.

The intake administrators shared that there is no formal intake administrator training, but named several other trainings that have prepared them for the position. These include Partnering for Safety, Supervisor Academy, shadowing with the Section Manager, peer learning with supervisors, HR training, and THRIVE for self-care strategies. The Section Manager has completed the Dare to Lead and Courage to Lead trainings, Partnering for Safety, Supervisor Academy, but notes that peer learning rather than position specific training has been helpful in their current role.

6.3. Training Needs

Caseworkers mentioned being interested in the following additional training topics (in order of frequency): (1) substance use (e.g., Fentanyl, narcotics, Cannabis, Narcan), (2) domestic violence (how to identify, what to look for), (3) DEI (e.g., LGBTQ, disability), (4) working with law enforcement, (5) sexual abuse, (6) Trails documentation, (7) sex trafficking, (8) medical neglect and medical record documentation, (9) father engagement, (10) risk assessment, (11) adolescent development, and (12) mandated reporter training. Caseworkers were most positive about shadowing opportunities as a way to learn about removals, assessments, and court testimony. However, peer learning was viewed as somewhat inconsistent between teams and supervisors.

Supervisors would like to have more leadership skills training so they can be prepared to better frame and articulate change management to caseworkers. One example is the LEAD program which pairs upper management with supervisors around strategic planning. Supervisors requested other trainings such as data-informed supervision to provide the “why behind the what” so they can more effectively explain to caseworkers the importance of closing assessments, for example. They also endorsed “data through storytelling,” so caseworkers know the practice implications when response times are not met or when assessments come back to the Division. Supervisors also reported that Crucial Conversation training sometimes falls short in preparing them for the deeper interactions they need to have with caseworkers regarding performance issues.

6.4. Training Strengths

The interviews revealed that caseworkers are hungry for knowledge, wanting to know more about substance use, domestic violence, and other areas that could help them form stronger working relationships with families. Practice coaches were identified as being very helpful and a necessary component of training of new caseworkers. Training for new hires is also a strength with the ability for them to participate in the ACEs online training while completing the Academy. They then take track-specific training for up to five weeks while carrying their first assessments. New hires also are given access to coaches for up to two months with the ability to shadow seasoned caseworkers. Additionally, supervisors join them on their key “firsts” such as home visits or court hearings, while other caseworkers can join them as needed with family visits. Newer caseworkers identified having field experience before the Academy as being pivotal in providing context for the subsequent new hire training and coaching opportunities. Caseworkers also identified that Track Training (intake and permanency specific practice training) by the county was very helpful along with job specific and hands-on field experiences provided during ACEs. Coaches were seen as a very valuable asset in training, as was resiliency training offered by the county.

6.5. Training Challenges

Almost unanimously, new caseworkers perceived Academy training content as being challenging to retain, and subsequently apply in practice. Upon review by the evaluation consultants, the curriculum appears ambitious for the amount of time allotted to training, which may be why new caseworkers struggle with absorbing the information at the volume and rate of speed it is delivered. Additionally, some caseworkers reported that there is insufficient time to meet all of the training requirements due to casework responsibilities and documentation expectations, while the lack of field experience limits the context needed to fully understand the training. It should be noted that the CWTS initial certification caseworker training recently was updated and is now being piloted with counties for refreshed engagement and more timely transfer of learning activities integrated throughout the Academy courses. Although counties are expected to train caseworkers on county-specific practice, Arapahoe County has increased the amount of training provided to assure that caseworkers have the information needed to effectively work with families.

6.6. Training Recommendations

Caseworkers offered several recommendations for enhancing the training they receive from the Academy and Arapahoe County, but all revolve around more opportunities for hands-on application and support. Specifically, caseworkers believe that shadowing is key for understanding how to complete an assessment, but there is a need for more veteran caseworkers to serve in this role. They would like an expansion of the coaching program, which is reported to be valuable for home visits, practice feedback, self-care, and mastering primary caseworker responsibilities. To facilitate the coaching program, caseworkers complete a Coaching Readiness Assessment and Coaching Profile to determine the best timing and fit for their coaching experience. The program also is structured with planning sessions, spot checks, and live supervision opportunities.

Caseworkers find field instructors to be a great support network and relish the opportunity to go on home visits with them and participate in practice conversations even when in training. Field instructors also help caseworkers to apply information learned in the Academy, especially for activities like RED Teams and high risk assessments. Veteran caseworkers often carry higher workloads that include more complex assessments, which may limit their ability to provide training and support for new caseworkers. Workload management training for veteran caseworkers could potentially address this challenge.

The literature on effective child welfare supervision offers several recommendations for training enhancements. For supervisors, refresher courses on child welfare knowledge after initial supervisor training is considered best practice to ensure that supervisors are current on advancements in child protective services and aware of local resources for families (Clark et al., 2008). Supervisors also would benefit from skills training to effectively address the “professional and emotional issues experienced by case-carrying child welfare workers, including offering workers strategies to address the daily stresses and the emotional work contexts of the job” (Clark et al., 2008, p. 25). Additionally, supervisors should be trained on communication skills, as the best practice evidence indicates that positive interpersonal relationships between caseworkers and supervisors enables enhanced critical thinking during supervision (Lietz, 2010).

Training is needed to support supervisors in balancing their sometimes complementary but competing roles of practice experts and accountability managers (Clark et al., 2008). Lastly, supervisors should ensure that caseworker training offers opportunities for professional and personal growth and development that align with Division priorities and practices (Hanna & Potter, 2012). Currently, the staff development unit is exploring the following trainings to address emerging areas of need for the Division: Situational Leadership, Crucial Accountability, Emotional Intelligence, and ADKAR for Managers.

7. Supervision

Staff interviews provided in-depth information on supervisory practices and processes in Arapahoe County with a focus on supervision logistics, caseworker supports, policies, procedures, and rules, critical thinking, and communication.

7.1. Supervision Logistics

The staff interviews explored the role of supervisors, intake administrators, and the Section Manager in conducting formal and informal supervision.

7.1.1. Supervisor Role

Most caseworkers meet once a week for 60-90 minutes, either in person or virtually, with their supervisor, although sometimes issues are pushed to the following week or handled during informal supervision sessions. Some caseworkers including more tenured ones meet every other week with their supervisor. Supervisors also are available outside of the formal supervision to respond to caseworker questions via text, phone, and email, and to engage in crucial conversations in person if needed. Some caseworkers also mentioned that other caseworkers and supervisors are willing to help and support when their supervisor is not available.

According to supervisors, they first check-in with caseworkers during formal supervision about how they are feeling, what's going on outside of work, and if they need any support for self-care. Caseworkers feel comfortable sharing their personal challenges and some supervisors are generous and more proactive with their offers of support including flex and documentation days. This ability to show empathy and compassion for their team is seen as best practice for supervisors, as caseworkers highly rate this type of agency support (Clark et al., 2008).

Supervisors typically go over every assessment with the expectation that the caseworker is prepared to discuss details of each case including safety concerns, family history, mitigation of risks, resources/services, ongoing transfers, fatherhood engagement, law enforcement notification, home visits, parental contacts, and next steps. The supervision meetings also allow caseworkers to present and process more challenging cases with unique circumstances and pressing needs. Caseworkers appreciate that when they are stuck or something doesn't feel right, supervisors are willing to spend more time on an assessment and allow the caseworker to question decisions, such as removals and findings. Some supervisors do not cover every assessment each week, but try and make sure to discuss all families over a two-week period.

Supervisors report that they often review ROC notes in real-time during supervision to determine if caseworkers are entering quality information or just placeholders, in addition to reviewing every closure summary before they are entered into Trails. Some supervisors have Trails and supervision notes up on a screen to check what caseworkers are reporting about their assessments. Several supervisors probe for specifics from caseworkers (e.g., what did the home look like) to make sure there are not any red flags in how the work with families is being conducted and documented. Direct communication is preferred by caseworkers if there is a question about a decision to give them the opportunity to explain their thinking and troubleshoot if something was missed or a mistake was made.

To prepare for these meetings, supervisors review the previous week's work, type up detailed supervision notes, send individual data reports, and share to-do lists and next steps with their

caseworkers. Several supervisors send emails every week to get updates and remind caseworkers about timeliness and documentation deadlines. Several supervisors described this type of oversight as “friendly micro-managing.” To be more effective communicators, supervisors often write out talking points because not everyone processes information at the same pace or in the same way. Supervisors also support caseworker practice by utilizing the Monday data reports¹⁹ to track assessment closures and Colorado Family Safety Assessment tool completion timeliness. Other strategies for reviewing casework include going into the field to offer support, doing spot checks with families, collaterals, and professionals, and planning to reinstitute group supervision.

7.1.2. Intake Administrator Role

Supervisors meet every other week with their intake administrator but check-in more frequently, both in person and by phone/text, as they are very accessible outside of the formal supervision times. These meetings vary from informal check-ins to the WOW (Worries, Opportunities, Well-Done’s) process to more formalized planning sessions, although a specific supervision template is not typically used (one is in development for 2023). During formal supervision, intake administrators discuss a variety of topics, but primarily focus on assessments, especially the highest risk and most critical ones. Supervisors come to the meetings with questions about assessments nearing 60 days, RED Team decisions, performance measures, and case closure decisions. Supervisors also discuss workload concerns, training expectations, personnel issues, communication strategies, and team dynamics for their caseworkers.

Intake supervisors also use supervision time to make personal connections and discuss supports for mental health and self-care of supervisors and caseworkers. One intake administrator also meets with each caseworker on their team, so that the caseworkers have a voice with their supervisor to discuss issues when they arise. Additionally, supervisors have the opportunity to connect with the Section Manager and Division Manager during all-intake meetings and informal check-ins. However, there have been fewer opportunities for group supervision post-COVID although the Division is moving more in that direction.

Overall, supervisors are very satisfied with the support they receive from the intake administrators. Specifically, they appreciate the information sharing, peer learning, hands-on support, and self-care resources they provide. For example, one supervisor noted that their intake administrator is willing to review every case closure, which helps them better understand the “why behind the what.”

Caseworkers also feel more heard about their concerns from intake administrators who are checking-in more regularly. They reported that intake administrators know who they are, and that there is an open-door policy with them, the Section Manager, and Division Manager. Supervisors also like the level of access that caseworkers have with the intake administrators, which helps facilitate information sharing and makes caseworkers feel recognized. However, some caseworkers wished that intake administrators

¹⁹ Monday data reports are provided by the county data staff and cover key performance areas for staff such as assessment closure and timely response among other metrics. The data are provided by worker, by unit, by intake administrator, and by section.

were more familiar with their work, and would like to meet with their supervisor and intake administrator together to process decision-making and how to think critically about cases.

7.1.3. Section Manager Role

The Section Manager meets 1-2 hours weekly with each intake administrator and weekly as a group with all of them. The supervision meetings look at workloads by using assignment data to balance assignments. They also review data reports (e.g., initial response, assessment response), work on policy development, and engage in practice conversations. The Section Manager meets with all supervisors once a month to disseminate Department information that is to be passed on to caseworkers. Currently these are voluntary, but administrators suggest that they be made mandatory so there is less attrition of information throughout the process. In these meetings, the Section Manager passes along agenda items from the Division Manager to intake administrators, who then report out to their teams to keep the information consistent.

7.2. Caseworker Supports

One of the biggest supports mentioned by caseworkers was other caseworkers, particularly those with more experience. Specifically, caseworkers are checking in with each other, reviewing each other's work, sharing successes and challenges, and asking questions about practice with families and documentation in Trails. This aligns with the best practice literature as peer mentoring and consultation has potential for reinforcing caseworker learning (Collins-Camargo & Millar, 2012). Weekly team meetings to staff cases together is seen as an important support for caseworkers, as is having access to a team group chat so that whoever is available may be able to help. Coaches are viewed as another important longer-term support, as they can go on home visits, walk through assessments, help with Trails documentation and closure summaries, and offer strategies for managing stress.

Another big support noted by caseworkers and supervisors is the Trauma Support Program (TSP). The TSP team provides self-care opportunities to caseworkers such as Yoga, animal-assisted therapy, drop-ins and outreach to discuss tough cases, rooms to decompress, and mental health resources. The Division also provides options such as mental health days, resiliency training, staff wellness outlets, massages, acupuncture, and dessert with the Division Manager. Additionally, new caseworkers and supervisors are provided with a Child and Adult Protection Well-Being Welcome Packet, which provides self-care information, strategies, and resources. Most of the caseworkers seemed knowledgeable and appreciative of the support available from the TSP, although workload concerns seemed to impact some caseworkers' ability to take advantage of the support.

Staff identified the support they get from the data team as being extremely helpful. For example, every supervisor cited the Monday reports as indispensable to their work. They identified the data team as being very responsive and always ready when they are needed. Lastly, caseworkers appreciate receiving kudos in the all-intake meetings, newsletters, all staffs, and through the employee of the month designation.

7.3. Policies, Procedures, Rules

The Division has numerous policies to ensure compliance of their staff for the required state and Arapahoe County child and adult protection procedures and rules. The following is a sampling of new and current policy directives:

1. Documentation Falsification Policy
2. Trails and Child and Adult Protective Services (CAPS) Data Restriction Policy
3. Texting of Substantive Case Information Policy
4. ROC Note Entry Timeliness Policy
5. HSConnects CAPS Policy
6. Child Welfare Records Policy
7. Naloxone Policy
8. Remote Work Policy
9. Reporting Child Abuse/Neglect of Fraud Guideline
10. Conflict of Interest Policy
11. Cross Reporting to and Joint Investigation with Law Enforcement Policy
12. RED Team Proposal Rules Crosswalk
13. Mandatory Reporting Policy

Supervisors shared a variety of strategies for assuring policies and procedures are followed while balancing the demands of challenging workloads. Supervisors were split on whether providing supervision notes were helpful for caseworkers in being able to organize their work. Some believe it provides common ground for next steps while others think caseworkers should take their own notes for accountability purposes. Other strategies include monthly spot checks of caseworker contacts and conversations with caseworkers and families at 45 days into the assessment to determine if ongoing services are appropriate.

Intake administrators look for red flags to assure that policies, procedures, and rules are being followed. For example, they press caseworkers to explain contact details, communications with Spanish speaking caregivers, and engagement with families when there are gaps in documentation for these activities. They also encourage caseworkers to obtain information for the assessment through conversation with the family rather than just following the interview form. Intake administrators also use ARD contact reviews and data reports to dig deeper, especially when a caseworker's caseload creeps up and they are unable to adequately respond to questions about whether their work has been done in alignment with expectations. However, one intake administrator wants better procedures for surfacing these issues, such as a checklist for supervisors to have layers of information for better oversight of the casework.

7.4. Critical Thinking

Supervisors offered several approaches for promoting critical thinking in casework practice. Most notably, supervisors want caseworkers to help answer their own questions about next steps rather than falling into the pattern of giving them the answers straight away. For example, some advocated live

supervision when going out with caseworkers on home visits and “biting their tongue” so the caseworkers can learn how to facilitate the conversations and information sharing with families. Other strategies include role plays about tough conversations, reasoning together instead of providing directives, getting creative to vet information offered by families, and focusing on family history to “think outside the box” on possible supports. They also mentioned resource drop-ins with the Prevention Team to get ideas for supports that supervisors are not aware of (e.g., rental assistance).

One intake administrator promoted developing case-, caseworker-, and supervisor-specific strategies for critical thinking featuring critical conversations that lay the foundation for addressing concerns, allowing space for answers, posing follow-up questions, slowing down the process, preparing ahead of time, and deciding how to monitor the requested change. Intake administrators also engage supervisors in situation-dependent conversations to act as devil’s advocate and take a big picture perspective. Other supports for critical thinking include practice coaches and required trainings and learning opportunities. However, intake administrators stress that caseworkers gain critical thinking through experience and making tough decisions when supervisors are not able to respond in the moment.

7.5. Communication

Administrators encourage shared accountability with compassion, task-orientation, and consistent communication. Communication of state policy is supported by management and supervisors who serve on boards such as the Sub-Policy Advisory Committee (Sub-PAC) and the Colorado Human Services Directors Association (CHSDA). State policy is communicated through operational memos. The Division attempts to anticipate changes from current legislation and plans a communication strategy in advance. Specifically, they design an educational and training approach, which include mini-labs (teach in the moment) and conversations in all-staff meetings.

For county-specific communications, the process starts with the Division Manager and Section Manager through weekly meetings with intake administrators to discuss concerns from situations that have come to their attention since the last meeting. The intake administrators are then tasked to communicate the information to supervisors and are asked to report back the feedback they receive to the Section Manager. Lastly, supervisors communicate the policy changes at All-Division or All-Staff meetings. This approach is supported by the best practice literature. According to Clark et al. (2009), “For the successful implementation of child welfare public policies, child welfare services agencies must hire and support supervisors with excellent capacities to absorb and communicate knowledge of child welfare practice, to establish clear standards, and to explain complicated policies and procedures to practitioners and managers alike” (p. 26).

7.6. Supervision Strengths

Supervisors and intake administrators employ a blend of administrative, educational, and supportive supervision to meet the individualized needs of staff. During supervision, support is provided in identifying staff performance against Division expectations such as completing and closing assessments within 60 days (administrative supervision). Caseworkers are encouraged to think critically on their cases

by asking key questions or connecting to resources such as the prevention team (educational supervision). Caseworkers also are asked how they are doing and if they need assistance (supportive supervision). The supportive supervision approach is important to “fostering a safe and positive environment for workers to be able to openly discuss their stress and frustrations” (Hanna & Potter, 2012, p. 421). The Division also utilizes the Five Essentials for Workplace Mental Health & Well-Being developed by the Office of the U.S. Surgeon General to center caseworker voice and promote equity.

The caseworkers revealed a range of support from their supervisors. Overall, supervisors are typically available by text, email, or phone, especially in emergencies. According to the literature, caseworkers highly value the availability of supervisors during a crisis, in addition to regularly scheduled supervision opportunities (Lietz & Julien-Chinn, 2017). Several caseworkers lauded the critical thinking and problem solving support they get from their supervisor, as they are able to provide the answers and next steps while the supervisor asks the tough questions to make sure all bases are covered. Supervisors also were described as hands-on, which was viewed as especially helpful with remote work and in times of higher workloads. The move back to the office three days a week is viewed as helpful in this regard, as supervisors should be easier to connect with, especially informally, although some caseworkers reported that supervisors were also easy to connect with in the hybrid work environment.

Supervisors each need something different from the intake administrators, with some preferring to be told what to do in the moment, while others respond better to questions for support. The Division has a diverse group of personalities and backgrounds, so intake administrators try to tailor their supervision rather than a one size fits all approach. They also utilize the WOW process to provide a holistic perspective of the work.

7.7. Supervision Challenges

Caseworkers were somewhat mixed on supervisor availability with some having supervisors that are always ready to talk or help, while others have supervisors who are sometimes unable to respond in the moment. When that occurs, caseworkers problem solve by seeking out other supervisors, caseworkers, or staff from other Division teams like kinship or prevention. This is more challenging for newer caseworkers who may not know where to go or who to seek out for support. Caseworkers also identified differences in the support provided to them by supervisors and management in terms of time off and the ability to flex schedules. Staff also reported some inconsistencies in the allowance for documentation protected time and general support for documentation efforts.

7.8. Supervision Recommendations

The recommendations for enhanced supervisory practice are drawn from the best practices literature and from staff interviews. First, the Division should clearly define and refine the supervisor role “to establish a common understanding of supervisory practices, tasks, and transfer of learning activities across all levels of the workforce” (Clark et al., 2008, p. 27). This is particularly pressing as the literature suggests that role confusion exists in child welfare agencies in that supervisors see themselves more as managers who stress accountability, while caseworkers are looking for supervisors to serve in more of

an advisory role (Clark et al., 2008). Arapahoe County seems well positioned in this area with the intake administrator role assuming much of the accountability processes, which empowers supervisors to focus on advocating for and supporting caseworker practice expertise. To effectively serve in an advisory capacity, supervisors “must be aware of when to model tasks, when to join in tasks, and when supervisees are ready to carry out tasks independently” (Hanna & Potter, 2012, p. 419). According to Clark et al. (2008), the process of “giving clear instructions, establishing expectations and standards, and explaining policies and procedures” (p. 25) offers a middle ground between the managerial and advisory roles supervisors are asked to inhabit.

Based on staff interviews, the county's practice of group supervision and case consultations should be fully reinstituted and woven into the fabric of Division practice. Best practice research indicates that group supervision, if implemented properly, would be a far reaching, beneficial practice that could enhance the supervisor role in caseworker practice (Bostock, Patrizo, Godfrey, & Forrester, 2019). This will have the advantage of deepening knowledge levels of new caseworkers and supervisors, and more fully operationalizing Division practice values for working with families. Group supervision lends itself well to enhanced critical thinking, both to better understand practice and assess the difficulties that families face (Beddoe & Davys, 2016). However, the literature indicates that group supervision requires a lead voice to turn decisions into actions, so the Division should identify individuals, either clinical experts or team managers, who can fill this role (Bostock et al., 2019).

Caseworkers articulated the need for even more emotional, well-being, and mental health supports, in addition to more shadowing opportunities. This aligns with best practice as “supportive supervision is associated with reductions in such negative worker outcomes as anxiety, depression, somatic complaints, burnout, and turnover” (Mor Barak, Travis, Pyun, & Xie, 2009, p. 25).

Another consideration is to focus on the quality of supervision rather than quantity as it relates to the norm of reviewing all assessments on a caseworker's caseload during each formal supervision meeting (Lietz & Julien-Chinn, 2017). If the average number of assessments per caseworker is 15, that equals four minutes of supervision per assessment, which may be insufficient to cover all of the necessary information and allow for reflection and critical thinking on key decision points. This is essential given the direct relationship between supervision quality and casework quality, especially for safety-organized and child-focused practice (Bostock et al., 2019). Supervisors can further enhance the critical thinking development of caseworkers by facilitating training supervision opportunities that highlight reflection and dialog processes based on a trusting relationship that allows for difficult conversations (Lietz, 2010). An opportunity exists to strengthen supervisory response when there are concerns between the Intake and Permanency Sections. In the “Practice Enhancement Section” of the Supervisor Performance Review Form, there is a narrative paragraph for how to measure if that is occurring. A sentence or phrase could be added that instances of friction or disagreement will be addressed between the involved supervisors in a supportive and strengths-based manner for staff.

8. Workload

Caseworkers reported an average of 15 current assessments on their caseload with a range from 7 (Caseworker A) to 22 (veteran caseworker). The number of current assessments varies depending on the number of caseworker vacancies at any given time. Several veteran caseworkers mentioned that they typically get the more challenging assessments, so their caseload and workload are sometimes higher than optimal. Information from Trails workload reports and staff interviews show that the intake administrator to supervisor ratios are 1:3 or 1:4. Caseworker to supervisor ratios range from 1:4 to 1:7. The higher numbers appear to be related to supervisor coverage of a vacant supervisor position. The caseloads managed by intake administrators (across 3-4 supervisors and 15-24 caseworkers each, on average) is 66-137 HRA assessments (average 101), 101 to 192 FAR assessments (average 156) for a total caseload across the three intake administrators between 167-329 assessments (average 257).

8.1. Documentation

Caseworkers keep detailed to-do lists and up-to-date calendars to track all documentation requirements and deadlines. Some caseworkers develop elaborate spreadsheets and color-coded inboxes to know exactly when documentation is due. They also rely on supervisor email reminders for interviews and ROC notes, weekly reports on documentation deadlines, and occasional supervisor assistance on closure summaries. Caseworkers make good faith efforts to keep up with documentation requirements but struggle with data entry across all of the required state and county data systems.

Intake administrators expect supervisors to check for completeness and timeliness of assessment documentation. Specifically, intake administrators expect supervisors to check for ROC note completion within four days, assessment closures, response times, family meetings, closure summaries, and referral notes. Although intake administrators do not conduct spot checks themselves, they are frequently looking at complaints and data reports. The new QA positions will have a role in checking assessment documentation. Administrators also conduct deep dives in Trails for intake performance, which generates conversations in intake administrator meetings. They also review assessment closures to see if any delays are team, caseworker, or supervisor specific.

From the caseworker perspective, the biggest support for documentation work is documentation days. On these days, there are no home visits, no new assessments, only uninterrupted time to get documentation completed. For some teams, caseworkers all stay in one room to work on closing summaries and complete safety/risk assessments. However, supervisors were split on the benefits of offering caseworkers protected days for documentation. Although one supervisor touted the benefits of having no assignments, case closures, RED Teams, or Listening to the Needs of Kids (LINKS) meeting to complete documentation, another argued that inefficient time management does not warrant pulling a caseworker out of rotation, and instead, more support should be provided before documentation deadlines get too far behind.

8.2. Review, Evaluate, Direct (RED) Teams

Arapahoe County runs their RED Team scheduling through ICM. All staff in certifiable positions are put into the ICM system and it calibrates (randomizes) based on calendars. Staff are scheduled 4.5 times per month on RED Teams. There are 12 RED Teams each day for one hour each. All are done virtually with cameras on. Based on staff feedback, it is very challenging to spend more than one hour at a time in RED Teams. They average about one referral every 15-20 minutes, so can complete 3-4 in a one-hour RED Team. On Red days, the supervisors are responsible for a straight disposition on the balance of the referrals. Two supervisors have to review the disposition and agree (they can't share thinking, must be an independent decision) for it to be a straight disposition. On Green days, the uncompleted referrals are reviewed the next day in RED Team. Although Arapahoe County is able to RED team over 50% of their referrals, administrators wish that more required referrals could be RED teamed. However, continued high volume and limited staff capacity creates persistent barriers. To address these barriers that all large counties face, a new State Board of Human Services rule change designed to adapt to and evolve with practice offers counties more flexibility as fewer referrals are now required to go through the RED Team process.

8.3. Workload Strengths

After reviewing job postings, staff evaluation documents, staff interviews, and information about staff assignments, the Division appears to have a strong hiring process, which should positively impact workload concerns. As of March 22, 2023, there were nine intake vacancies and six permanency vacancies. These vacancy rates are comparable to other peer counties. There has been a small increase in vacancies recently, as four caseworkers were terminated due to personal or performance issues. In addition, one caseworker was terminated for the falsification of ROC notes (reported by the county to CDHS and in the process of criminal proceedings). It should be noted that oversight structures are now in place to identify and address this type of caseworker behavior.

Caseworkers also mentioned that the data analyst is very responsive and helps with all interagency case management and documentation, and that HSConnects is valuable because of its document upload feature so they don't have to keep a large case file. Arapahoe County also is currently working with partners from Auckland, New Zealand on a supervision tool that pulls in caseworker workload to allow supervisors to review family history without having to look at Trails.

8.4. Workload Challenges

Given the mantra that "if it's not in Trails it didn't happen," caseworkers agreed that their biggest challenge is the requirement to document everything about their assessment work but without the time to do so. Given their overall caseloads and daily workloads with full schedules of phone calls, home visits, travel, and service planning, some caseworkers argue that they need specific days for documentation or the ability to set boundaries, so they are not forced to spend all of their work time juggling documentation and practice responsibilities.

The biggest reported challenge is with the timely and complete recording of ROC notes. Some caseworkers struggle with the amount of editing required and use placeholders rather than typing in complete notes during family meetings, all of which makes it hard to keep track of ROC notes. Caseworkers sometimes feel overwhelmed that they may have missed something and hate being late, but they often don't see an option and have to work overtime just to finish. Caseworkers also reported different state and county expectations for ROC note completion, supervisor variation on enforcement of data entry deadlines, and contradictory understandings of what should be in Trails (e.g., contacts, background checks) between intake and permanency units, which has caused some frustration. Other challenges include the large amount of documentation required for removals and transfers, uncertainty with documenting developmental screens, and unclear definitions for findings required in Trails.

There is a concern that the move to three days a week in the office will result in other vacancies. However, the administrators have tried new messaging which seems to have allayed some fears about work-life balance and flexibility, and the concerns appear to have abated since the new policy was first announced.

8.5. Workload Recommendations

One of the primary recommendations that surfaced from the caseworker interviews was the need for protected time throughout the month to complete documentation, especially after a removal so court paperwork and other policy requirements can be met. The literature suggests that supervisors should provide task help to caseworkers (e.g., Mor Barak et al., 2009), so the Division should explore other avenues for documentation support including supervisor assistance in completing required assessments, summaries, and notes. Relatedly, supervisors should hone their organizational skills so they can help manage their own and their caseworkers' workloads when needed (Hanna & Potter, 2012). Furthermore, workload policies should be examined to ensure that supervisors have the time to promote critical thinking of caseworkers (Lietz, 2010). Other staff recommendations include more Caseworker A's to help with closure documentation and ROC note completion, the ability to go out on home visits in pairs so one caseworker can enter ROC notes right into Trails, more training on definitions and labeling for the global family assessment, and streamlining of redundant documentation.

Given decreasing resources paired with increasing workloads, supervisors face challenges ensuring there is sufficient time for as-needed caseworker support and consistent supervision (Lietz & Julien-Chinn, 2017). To address this challenge, "Policies should be considered related to the number of supervisees a supervisor manages, whether supervisors should be carrying cases, and the degree of other responsibilities required of this position to ensure that supervisors have the time needed to provide a reasonable level of supervision" (Lietz & Julien-Chinn, 2017, p. 152). Given the persistent recruitment, turnover, and retention challenges facing public child welfare agencies (Lietz, 2010), processes and tools for hiring supervisors should be developed and tested to ensure a qualified and competent workforce (Clark et al., 2008).

9. Casework Practice

The five models that drive Arapahoe County practice are Differential Response (DR), Trauma-informed care, Two-Generational approach (Two-Gen), Partnering for Safety (PFS), and Diversity, Equity, and Inclusion (DEI).

9.1. Practice Models

Differential Response is an innovative system reform that allows child protective services to address screened-in allegations of child maltreatment through a dual-track response system. For both the Family Assessment Response (FAR) and High Risk Assessment (HRA) tracks, the services provided include engagement strategies that assist in the assessment of safety, risk, family needs, and family strengths. DR is a way to enhance the child welfare system to avoid creating adversarial relationships with families and increase their voluntary engagement in services. There has been practice drift over the last five years for DR resulting from the loss of institutional knowledge in the Division starting in 2017. As a result, current caseworkers and supervisors are not as well versed in the Seven Core elements of the model as they could be. The county has added training on the DR model into ACEs and staff receive some DR training in the Academy. The Division also is trying to reinstitute group supervision as part of the DR model. Administrators are assessing deficiencies in knowledge about DR, especially the difference between FAR and HRA practice. One challenge is that practice for both tracks is very similar, so some intake caseworkers struggle with how to do a FAR assessment with fidelity to the model.

The Trauma Support Program provides internal support to staff and external trauma-informed care support for families. They offer training about how to approach casework through a trauma-informed lens. Specifically, they model how to engage with families to address trauma and not just behavior, and how certain case types need an enhanced trauma-informed approach.

Partnering for Safety draws on evidence-based and innovative methodologies and tools from around the world, including Solution-Focused Brief Therapy, Narrative Therapy, Strengths-Based practice, Family-Centered practice, the Signs of Safety Approach, the Resolutions Approach, the “Three Houses” Information Gathering Tool, the Safe and Together Model, Response-Based Practice, Motivational Interviewing, Family Group Decision-Making, Appreciative Inquiry, and the latest thinking from Implementation Science. Post-COVID, there was a renewed emphasis on Partnering for Safety training. After Arapahoe County caseworkers complete ACEs, they practice for six months, then come back to PFS training. Supervisors also get PFS as part of their training.

The Two-Gen model is newer in the county, starting in 2019. It is implemented more at the departmental level with a project manager who facilitates training during new staff orientation and as part of ACEs. There is a Two-gen strategic plan and most communication comes from the County Director.

Arapahoe County is active with many Diversity, Equity, and Inclusion initiatives. First, there is an Inclusivity Task Group to address policy, practice, and community outreach. Second, the county is

engaged in an organizational self-assessment and strategic planning process through multiple subcommittees. Third, the county has a DEI group and Culture of Care training focused on anti-racist and anti-oppressive practices. Fourth, the Department is partnering with the All Children All Families group to focus on LGBTQIA+ training and peer learning. Lastly, the county is working more closely with families with disabilities and mandating re-certification training around disability topics.

9.2. Family Engagement

Supervisors did not identify a singular family engagement model they followed but shared multiple philosophies, values, and practices they endorse. From a philosophical perspective, supervisors diverge from the push for court involvement in favor of engagement in voluntary services, as families are often willing to take action to ensure less drastic measures and less restrictive placements for their children. From a values perspective, supervisors spoke about finding common ground with parents who share the same goal about their children being safe and well. They also mentioned having empathy while understanding the power differential that causes families to be fearful about what could happen to them. From a practice lens, supervisors discussed mediation, conflict resolution, and facilitated family meetings as engagement tactics. Family engagement meetings are required when the risk assessment is high and best practice is to complete the Framework with the family to help protect against them disengaging. Several supervisors talked about the challenge in balancing information gathering with rapport and trust building. A few supervisors cautioned that in wanting to trust and partner with families, caseworkers still need to be assertive so they can hold families accountable.

Caseworkers shared additional family engagement strategies including the Two-Gen approach to identify families in their environment from a systems approach, which looks through a poverty, education, and vocational lens at what families need to do to be successful and keep their kids safe. From a service perspective, caseworkers can talk with families and collaterals about moving an assessment to an ongoing case if more services are needed or there is a wait for services to come available. LINKS is viewed as a valuable approach for family engagement with everyone at the table to discuss barriers, next steps, and needed supports to make sure children are safe. It is typically used when transferring an assessment to permanency, but also can be used as a family engagement meeting during intake if it is a high risk situation.

9.3. Child Safety

All caseworkers report that they consider keeping children safe and families together as their first priority, primary goal, and guiding principle. Caseworkers shared strategies including working together to build rapport, going in with an open mind regardless of the referral, and checking biases and stereotypes. During the assessment, approaches include strengthening support systems, exploring kinship options, exploring holistic dynamics, and meeting response times to better mitigate safety concerns.

The general consensus from caseworkers is to meet families where they are with non-judgmental understanding, empathy, respect, and listening, while assessing for safety and engaging for service and

resource delivery using a strengths-based approach. Caseworkers understand that families typically have their guard up at the start as “it’s never a great day when CPS is knocking at the door.” Caseworkers are intentional about taking away the CPS stigma and label that they are there to take away children and are transparent that they value keeping families together and providing support and resources. To accomplish this, they attempt to build rapport and trust, and share safety concerns first before moving towards engagement. This includes coming in with a clean slate and a level playing field regardless of prior history.

Additionally, caseworkers individualize their approach for each family as every case is different. For example, families with no prior CPS experience need more clarity about the assessment process to alleviate their possible anger and fear. This entails a discussion of safety concerns, support networks, and resources, although some families are already connected to resources which illustrates the “one size does not fit all” mentality. On the other hand, families with previous child welfare system involvement require a different stance as they may be more concerned with going through the motions than engaging with their caseworker.

9.4. Casework Practice Strengths

Generally there was strong casework practice and values for keeping children safe. Supervisors mentioned using natural supports to keep children safe, being creative with safety planning and finding resources, leveraging community efforts, and digging below the surface to make sure safety is being addressed. Interviewed staff emphasized the “trust but verify” approach with one caseworker describing it as bridging the gap between what’s being told and what you’re seeing and hearing.

Partnering for Safety drives family engagement practice as families are the acknowledged experts of their family. They are routinely asked about their strengths and areas for improvement, and are seen as joining with the caseworker in the determination of how best to keep their child(ren) safe. The county has other practice strengths including the DR model which supports intake specific practice enhancements, and data-driven decision-making, which is seen as key to a flourishing team and better family outcomes. One caseworker shared that it is “Rewarding to see families make huge turnarounds.”

9.5. Casework Practice Challenges

A theme that resonated throughout the interviews was the lack of a cohesive practice model articulated by the staff. Supervisors and some caseworkers talked about Differential Response and Partnering for Safety, but the tenets of family engagement and child safety were not explicitly situated in these models. There has been practice model drift as DR champions have been lost to turnover, while previously mandated activities, such as reading Signs of Safety, have been lifted for more traditional training options. As a result, caseworkers have not internalized the practice and are “forgetting why we do this.” Staff appear to be comfortable with their micro practice but seem less confident on the macro practice of working with families. Although more experienced staff identified the use of kinship care, the family as expert, and community resources and supports, newer staff were less likely to discuss their philosophy or values/beliefs about families, and several were not able to fully describe DR or PFS.

For most caseworkers interviewed, engaging families was important, although the "nothing about me without me" was not heard as a practice. Caseworkers identified several barriers to family engagement also mentioned in the literature including documentation pressures, response time requirements, higher caseloads, and limits on resource capacity (Berrick, Dickens, Pösö, & Skivenes, 2016). Additionally, engaging fathers was not talked about unprompted during the discussion of family engagement. The biggest challenge facing caseworkers is how to keep children safe when parental substance use is not changing. Some caseworkers would prefer to intervene earlier to prevent harm for vulnerable children in these cases. Other systemic challenges include the court's role in keeping children safe when substance use is the main concern and sometimes differing expectations from guardians ad litem (GALs).

9.6. Casework Practice Recommendations

Further embedding the practice models of Partnering for Safety and Differential Response could occur through language and expectation changes in the evaluation process. Currently, DR and PFS are referenced in the Essential Job Function section of the Intake Supervisor Performance Review for "Leadership & Supervision," but could be further integrated for "Professionalism, Teamwork, & Collaboration" and "Program Management." For example: "Reviewing actions taken in cases *to assure adherence to Partnering for Safety and Differential Response Practice Models*" could be added as Intake Supervisor program management responsibilities.

Practice model implementation and child safety centering could be further strengthened by including language and expectations changes in the Intake Caseworker Performance Review. For example, "Consistently applies required skills and delivers services that are driven by the safety of the child and best interest of the family" could be added in the Essential Job Function section for "Service Delivery." For the "Description of Caseworker Responsibilities," language such as "Using principles of Partnering for Safety or Differential Response" could be added, perhaps identifying the specific principles desired.

Use of case consultation (another component of Partnering for Safety) could be beneficial prior to assessment closure where other Division staff could assist in assuring that client difficulties have been addressed to the extent possible to assure ongoing child safety. PFS should be more deeply and consistently integrated across all aspects of the Division such as training curricula, policy documents, and day to day caseworker and supervisor tasks. Arapahoe was once the lead county in this area, so this should be attainable especially with the recent consultation and training on safety-organized practice.

10. Accountability

From an accountability perspective, intake administrators expressed a willingness to meet supervisors where they are, but also value a balance between independence and support. Intake administrators take a data-driven approach to reviewing supervisor work. Specifically, they use the Monday data reports to review assessments over 45/60 days, Colorado Family Safety and Risk Assessment tool completion, ROC notes, caseworker caseloads/workloads, interview exceptions, and congregate care placements. Intake administrators also review complaints and calls from families by looking through

Trails documentation. They conduct spot checks with the hotline/staffing teams to review referral documentation, and perform deep dives with the prevention team to look for patterns in subsequent involvement.

Intake administrators ensure supervisors are checking in with caseworkers and do their own follow-ups at team meetings. The goal moving forward is to go into the field with staff to model first contact through the entire assessment and monitor the learning curve of supervisors and caseworkers. The Section Manager sits in on LINKS meetings, observes intake all-staffs to see how administrators relate to supervisors, reviews supervision notes, engages with supervisors to determine support they are receiving from intake administrators, generates conversations about personnel issues, and conducts caseworker check-ins.

10.1. Caseworker and Supervisor Evaluation

Arapahoe County caseworkers and supervisors are held accountable to the following Service First Principles as part of their performance review:

- **Excellent Quality:** Delivers high quality services that are in line with goals and overall work objectives
- **Responsive Government:** Understands customers' needs and responds in a timely manner
- **Visionary Thinking:** Recognizes and understands the long term, strategic impact of actions and decisions and envisions entirely new ways of providing services
- **Innovation:** Works to implement new ideas, creative solutions and promotes improvements to achieve goals and overall work objectives
- **Caring Leadership:** Leads effectively by coaching, motivating and guiding others to achieve goals and overall work objectives
- **Effective Communication:** Demonstrates the ability to effectively communicate by using the appropriate method, manner and context for the audience
- **Fiscal Responsibility:** Demonstrates an awareness of the fiscal impact of their actions and seeks to optimize the use of resources
- **Integrity:** Demonstrates a high ethical standard in the performance of job duties and in dealing with others
- **Respect for Others:** Demonstrates respect for others regardless of position or individual differences
- **Safety:** Takes responsibility for ensuring a safe environment for themselves and others
- **Teamwork:** Cooperates with others to achieve goals and overall work objectives

10.2. Accountability Strengths

Intake administrators use outcome data and performance measures from a variety of data sources to inform policy and practice decisions. Supports for outcome data tracking including new technology to support more timely documentation entry and business support team running reports for the Section Manager. Overwhelmingly, staff at all levels know the importance of performance accountability and

seem committed to meeting all of their various requirements. Intake administrators also utilize incentives for good casework practices but balance it with consequences. For example, they employ progressive discipline starting with conversations with supervisors, administrators, and HR, reminders of expectations, and memos with job duties that are not being met (not placed in permanent record).

Monday data reports were deemed very helpful and effective by both caseworkers and supervisors. The use of outcome data reflects an “outcome orientation to management practice [with] (1) reports that focus on critical outcomes that are easy to read and use; (2) an organizational culture that supports learning and outcome achievement; and (3) managers with the skills and knowledge to use data toward achieving higher levels of outcomes” (Moore, Rapp, & Roberts, 2020, p. 493).

10.3. Accountability Challenges

In reviewing the outcome data provided by CDHS, it appears that there has been an increase in the timeliness of Colorado Family Safety Assessment tool completion in 2022 after a sharp decline in 2020 and 2021. However, Arapahoe County is still behind its peer counties on this performance measure. Administrators reported that there was apparently more tolerance in the past for performance lapses, so this was not properly addressed over the years and became ingrained behavior. The county has met with CDHS about its performance concerns, and is looking to peer counties for best practice recommendations.

Intake administrators question whether they are disconnected from staff and what they think is important. Specifically, they are concerned that a compliance-based philosophy may present as a punitive approach to caseworkers, which may be mirrored in how they work with families (Collins-Camargo & Millar, 2012). Thus, they try to impart the importance of being safety-focused and why it’s necessary to meet response times and follow-up with families. Like all public child welfare agencies, Arapahoe County is challenged by federal and state accountability requirements which adds time for administrative tasks and limits time for critical reflection, family engagement, and service provision (Lietz, 2010).

10.4. Accountability Recommendations

Administrators suggest that the Division follow the “Sleep Tight The Kids are Alright” model, which looks more holistically at each family in addition to focusing on the current referral concerns. This allows caseworkers to pick up on patterns and trends, which may lead to additional involvement to provide services. To actualize this, intake administrators may conduct deep dives of cases and prepare a mapping of the family’s journey through the child welfare system. From this sample case, they can list their practice concerns from an intake and permanency lens and work with caseworkers and supervisors to identify practice enhancements. Technical and practice concerns about the Colorado Family Safety Assessment tool could be addressed by CDHS to help all counties ensure compliance with timeliness standards, and promote consistency and knowledge on how to understand and complete the tool.

11. Division Culture and Climate

Intake administrators described the current Division culture as the best it's been in a long time. Management has "moved mountains" to create a positive and supportive Division climate that is grounded in work-life balance and self-care. Leadership is more engaged in the work and willing to get their hands dirty. Leadership also demonstrates greater empathy, caring, and gratitude to the supervisors, caseworkers, and staff. For example, hardships and trauma of the work is acknowledged and space and support is given for mental health breaks. With more minds and new eyes looking at practice, it has become more innovative, DEI focused, and culturally appropriate.

Intake administrators reflected on the Division before and after the new leadership took hold. Before it was like "fighting for the headboard on the Titanic" with a lot of turnover, inefficient hiring and staffing processes, and a lack of consideration for the emotional impact of child welfare work. Now, the Division is almost fully staffed with better recruitment, interviewing, and hiring procedures in place. There also is more support, teamwork, and leadership. The increased emphasis on self-care and mental health supports for Division staff has changed the culture from "just do it" to "it's okay not to be okay." The Division restructuring with the addition of the Section Manager and a new intake administrator, has yielded a smaller supervisor/caseworker ratio and more clarity on team needs and expectations.

Overall, supervisors report a very positive Division culture with a more relationship-based approach. Specifically, there is a lot of peer support and mentoring within the supervisor team with a willingness and ability to check-in and help each other. Although there is some difference of opinion on the balance between increased supervisor and administrator support and caseworkers feeling micro-managed. Another positive is the restructuring and hiring that has increased caseworker positions and decreased workloads so caseworkers can do casework in addition to documentation and closing assessments. As for changes in the culture, the Division now has a more "all hands" approach with the ability to reach out beyond the supervisor or direct team to anyone in the Division. Supervisors see the administration as sharing real information now, even if it's not all "sunshine and rainbows." Administrators are more approachable and this open-door policy is also illustrated by an increased emphasis on self-care.

Caseworkers shared mixed feelings about the current Division climate and culture. On the positive side, the Division is at the forefront of change, defined by creative practice, talented staff, collective accountability, supportive colleagues, self-care and mental health initiatives, and empathetic management who acknowledges and accounts for the demands of the work. However, caseworkers want to feel like their "cup is full at the end of the day." While they acknowledge the importance of compliance with timeliness and documentation requirements, they are concerned it sometimes comes at the cost of fully being able to engage families and provide resources and services. Some caseworkers also perceive a divide between caseworkers and supervisors and would like to see more empathy, recognition, and collaboration as everyone is working toward the same goal. However, at the micro level, caseworkers report that the team culture is excellent, with a great mix of professional relationships and personal friendships among caseworkers. It should be noted that, "for child welfare

agencies, like all organizations, culture change or systemic transformation takes time and must be supported with consistent administrative messages” (Blome & Steib, 2007, p. 14).

11.1. Division Culture and Climate Strengths

From an intake administrator perspective, the culture has moved from being unpredictable with a shaky foundation to being resilient with a trust in the overall vision for the Division that better fits values and beliefs about families. This has resulted in enhanced supervisor-caseworker relationships and improved job satisfaction as measured by surveys and retention numbers. There is good energy in the intake administrator group with a more settled feeling and a belief that casework is making an impact with families.

Overall, caseworkers are excited for and supportive of the move back to the office for three days a week. Many staff hired during COVID discussed not knowing people from other teams and a disconnect as a result. Some noted they will get to meet some people on other teams for the first time. A veteran caseworker feels that it will help retention because of the personal connections made in the office and the ability to learn new things through informal interactions. This aligns with a recent study that indicates caseworkers will benefit from increased connections and supports from a return to an in-person work environment (Shadik, Perkins, & Heller, 2023). A newer caseworker expressed some reservations about being able to stay on track and maintain productivity in a more social atmosphere, although current research indicates that caseworkers may feel more motivated going back to the office (Shadik et al., 2023). Another newer caseworker sees potential for more supports from supervisor and fellow caseworkers than when working remotely, but acknowledges it will require an adjustment period for most. Many identified that it will be an opportunity for informal training from coworkers, or "roll the chair back supervision," that occurs from being able to bounce ideas off of peers and to get support.

11.2. Division Culture and Climate Challenges

At the macro level, the culture is more fraught with worry and concerns due to negative media attention, court cases, and lawsuits. One caseworker captured this sentiment, “Caseworkers are not seen as being trustworthy. Trying to catch them doing something wrong.” According to Blome and Steib (2007), “Consistently negative media coverage can only add to the well-documented difficulty that child welfare agencies experience in recruiting and retaining qualified service delivery personnel” (p. 22). This also created stress for existing caseworkers, which was exacerbated by working remotely without the ability to connect and communicate with others who are feeling the same way.

From the intake caseworker perspective, the relationship between intake and permanency units is challenging and in need of greater collaboration to forestall any negative impacts on the Division culture and climate. The intake unit believes that permanency caseworkers can sometimes more effectively address the service needs of the family, which could prevent another referral or new assessment from coming to the intake team (it should be noted that staff from the permanency unit were not interviewed for this evaluation). Administrators stress that the intake and permanency units share a common value that each child/youth is everyone’s responsibility and practice accordingly. To address this divide, more

time for team development is warranted to forge agreement on roles, responsibilities, and practices. (Clark et al., 2008).

11.3. Division Culture and Climate Recommendations

Caseworkers had many ideas to enhance the Division climate and culture:

1. More opportunities to interact with intake administrators and Division leadership including regularly scheduled meetings, specialized workgroups, team-building activities, and informal check-ins to voice concerns and get support.
2. More emphasis on getting to know different people, interacting with other teams, having time for connection outside of all staffs, meeting for lunch, and exploring the idea that people are more likely to help if they know each other.
3. More focus on retention than just hiring, as culture starts with keeping people. Specific recommendations include retention bonuses in addition to hiring incentives, enhanced orientation and onboarding processes, increased time for team-building, and additional opportunities for self-care, prioritizing mental health, and resiliency training.
4. More grace and compassion for practice decisions rather than assuming ill intent or lack of competence.
5. More collaboration between intake and permanency with conversations about family information and subsequent referrals to assist both units in conducting best practice.
6. More creativity and transparency for caseload and workload management with assessments, removals, and closure support from supervisors to account for ebb and flow of referrals.

To enhance the Division culture, several supervisors believe that 6-7 caseworkers are too many to supervise effectively while practicing self-care, and suggest they go back to 1:5 supervisor to caseworker ratio. Another recommendation is to focus on making decisions and particularly the “why” behind decisions rather than “hiding behind the bushes,” which prevents the Division and families from moving forward. Supervisors are in support for the move back to the office three days a week thinking it will boost morale, allow for more staff connections, and recapture the family feeling that existed in the Division before COVID. One supervisor wants the Division to “walk the talk” when it comes to promoting self-care within the Division by looking at individualized needs and not just expecting that everyone will grow at the same pace. Another supervisor promotes a more business-like approach with leadership standing behind their decisions, while accounting for but not being driven by feelings and emotions.

Intake administrators would like to see a move towards a more practice-driven Division with a stronger commitment to the Arapahoe County practice model. They have observed a drift from DR and PFS as new supervisors were hired, but noted they have re-engaged with safety-organized practice training to get back on track. They also acknowledged that the Division is good at many things, but only great at several and advocated for an assessment of what they do well so they can focus on those practices. Intake administrators are in favor of the move back to the office and believe that work is learned when you’re doing it (e.g., hearing other caseworkers talk to families), and that social connections are key to enhance how they communicate with each other and with families. From a workforce perspective, the

intake administrators urge a shift in thinking to integrate the “new normal” of generational attitudes, and forge a balance between professional expectations and a supportive work culture. Also, enhanced onboarding processes would facilitate greater Division culture and climate consistency. Lastly, intake administrators suggested strategies for keeping morale up, being humble to be better and grow, and working to show the community that Arapahoe County is not defined by one incident or one person.

12. Evaluation Summary

The CDHS audit of the Arapahoe County Department of Human Services that began in July 2022 identified potential concerns about caseworker and supervisor practice consistency, oversight, and accountability. This comprehensive third-party evaluation including an assessment review, outcome analyses, staff interviews, and document review found **no pervasive agencywide practice issues that indicate systemic lapses to protect children or serve families**. Furthermore, the second contact review from the CDHS Administrative Review Division found **no evidence of systemic concerns of falsification of contacts**. Additionally, a record of CDHS activity with ACDHS over the past four years was reviewed and revealed no major safety concerns related to casework, supervision, or staffing. The findings demonstrate that **ACDHS is actively working to address identified intake challenges through supervisory strategies aligned with the best practice literature**. Specifically, the Division has:

1. Hired, onboarded, matched, and trained new caseworkers and supervisors to overcome the high staff turnover that had increased caseloads and supervisor to caseworker ratios
2. Developed new policies, procedures, and practices to improve timeliness and responsiveness to family needs
3. Increased supports for caseworkers and raised expectations and accountability of supervisors and administrators in reviewing casework practice
4. Enhanced Division oversight by using data to manage staff performance and inform practice
5. Restructured the Division and engaged in intentional change management to strengthen the culture and climate

There are measurable impacts from these actions as evidenced by the **upward trend in timeliness of initial response, assessment closure, and safety assessment completion during the past year**. Most notably, the Division has accomplished these improvements in the aftermath of a major leadership change, the COVID pandemic, social unrest in Aurora, and sustained media scrutiny.

The evaluation surfaced many opportunities for growth and areas that could benefit from continuous quality improvement as ACDHS continues to enhance its practice. Following are a sampling of recommendations that emerged from the evaluation:

- Reclaim the identity of Arapahoe County as leaders in innovative practice centered around Partnering for Safety and Differential Response (DR).
- Implement the move back to group supervision (a DR practice model component) and case consultations (a Partnering for Safety practice model component) as a way to fully integrate the

practice models into casework and to maximize the sharing of expertise and oversight between intake staff.

- Elevate the discussion of family history and timely completion of the Colorado Family Safety Assessment tool during the assessment process.
- Refine expectations of supervisors in such areas as providing documentation days, offering protected time for removals, and allowing flex time when staff are required to work overtime.

Several recommendations also emerged from the evaluation for ways that CDHS can collaborate with Arapahoe County and other Colorado counties to enhance intake practice.

- Staff identified concerns related to the timely completion of the Colorado Family Safety Assessment tool. CDHS could address this issue by working with counties statewide to improve the usability of the tool.
- Staff indicated challenges in meeting the current RED Team requirements and how this affects other essential functions. The State Board of Human Services has recently changed rule regarding RED Teams, which should provide more flexibility to counties and add more value to the RED Team process.
- Staff identified that the Child Welfare Training System (CWTS) Academy training is challenging to integrate into practice. The upcoming update of the initial certification training should allow for more timely transfer of learning activities. CDHS also could work with CWTS to further explore strategies for embedding knowledge translation and hands-on learning into the training process.
- CDHS and CWTS can collaborate on developing training opportunities that are essential to caseworker readiness, along with offering training during the most applicable timeframes and most accessible delivery modalities (e.g., in-person and virtual), so that training is easier for caseworkers to absorb and retain.

13. References

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Appendix A: Assessment Review Template

Identifying Information

Date of the Review ___/___/___ Referral I.D.# _____

Caseworker Name _____

Reviewer Name _____

ASSESSMENT: PA5 and PA4 assessment closed during the sampling period

	Requirements	Questions	Answers			Location	Notes
1	1 7.000.2 7.103.1 7.103.5 (A)(B) C.R.S. 19-1-103 C.R.S. 19-3-102 C.R.S. 19-3-308	Was the referral appropriately assigned in accordance with Volume 7?	Yes	No	NA	Trails: Referral Info	
2	7.104.1 (B)(1)(b) 7.104 7.104.1 7.104.15 C.R.S. 19-3-308(3)(a)	Were all required parties interviewed?	Yes	No	NA	Legacy Trails: ROC Notes, Assessments - Interview	
3	7.103.61 7.104.1 (A-C) C.R.S. 19-3-308 7.104.1	Were reasonable efforts made to interview the alleged victim(s)?	Yes	No	NA	Legacy Trails: ROC Notes, Assessments - Interview	
4		Were reasonable efforts made to locate the alleged victim(s) before an "unable to locate" determination was made?	Yes	No	NA	Legacy Trails: ROC Notes	
5		Were referrals to law enforcement documented if there was an allegation of sexual abuse, human trafficking, or the PRAN is a third party?	Yes	No	NA	Legacy Trails: ROC Notes or LE Tab Trails Mod: HT Field	

6	7.103.7 (B)(1-2) 7.107.12 7.107.13 7.107.14 7.107.15 7.107.16 7.107.23 7.107.24 7.201.1 7.301.231	Is the level of intervention appropriate (e.g., referral to supportive services, open to a case, removal), given the documented levels of safety and risk?	Yes	No	NA	Legacy Trails: Closing Summary	
7	7.000.2 7.104.132 7.104.141 (B) 7.108.1 7.108.2 C.R.S. 19-1-103 (1)(a)(b) C.R.S. 19-3-102	Based on documentation, did the county's OVERALL finding match the definition of Founded, Unfounded or Inconclusive?	Yes	No	NA	Trails: Finding Window	

General Comments	

Appendix B: Assessment Review Ratings

Sample #	Referral #	1) Was the referral appropriately assigned in accordance with Volume 7?			2) Were all required parties interviewed?			3) Were reasonable efforts made to interview the alleged victim(s)?			4) Were reasonable efforts made to locate the alleged victim(s) before an "unable to locate" determination was made?			5) Were referrals to law enforcement documented if there was an allegation of sexual abuse, human trafficking, or the PRAN is a third party?			6) Is the level of intervention appropriate (e.g., referral to supportive services, open to a case, removal), given the documented levels of safety and risk?			7) Did the county's OVERALL finding match the definition of Founded, Unfounded or Inconclusive?		
		CJ	JR	REC	CJ	JR	REC	CJ	JR	REC	CJ	JR	REC	CJ	JR	REC	CJ	JR	REC	CJ	JR	REC
1		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
2		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
3		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
4		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A
5		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A
6		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes
7		Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	No	No	No	Yes	Yes	Yes
8		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
9		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
10		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A
11		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
12		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes
13		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	No	No	No	N/A	N/A	N/A
14		No	No	No	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
15		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
16		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
17		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A
18		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
19		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
20		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
21		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
22		Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes
23		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
24		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
25		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
26		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes
27		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A
28		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A
29		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
30		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
31		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	No	No	No	Yes	Yes	Yes
32		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
33		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	No	No	No	No	No	No
34		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
35		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes
36		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
37		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	No	No	No	N/A	N/A	N/A
38		No	No	No	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	No	No	No	N/A	N/A	N/A
39		Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes
40		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A				Yes	Yes	Yes	N/A	N/A	N/A
41		Yes	Yes	Yes	Yes	No	Yes	Yes	No	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
42		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
43		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
44		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
45		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
46		Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
47		Yes	Yes	Yes	No	No	No	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
48		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
49		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
50		Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
51		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A
52		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A
53		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
54		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
55		Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	N/A	N/A	N/A
56		Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A	N/A	N/A	N/A	N/A	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

Appendix C: Outcome Metrics and Performance Measures

Figure C1: No Recurrence of Abuse Rates - 2018

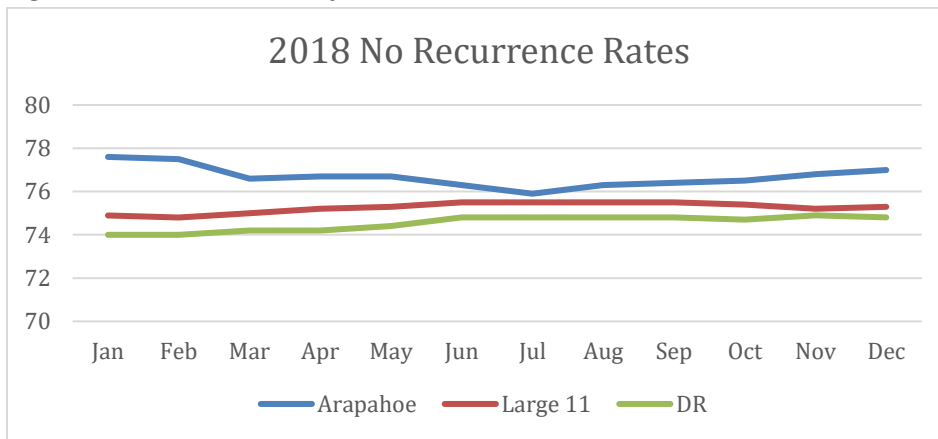


Figure C2: No Recurrence of Abuse Rates - 2019

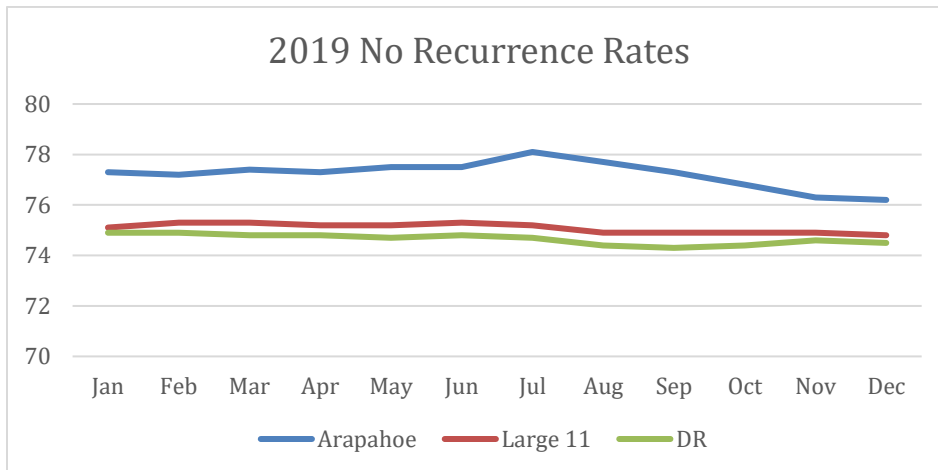


Figure C3: No Recurrence of Abuse Rates - 2020

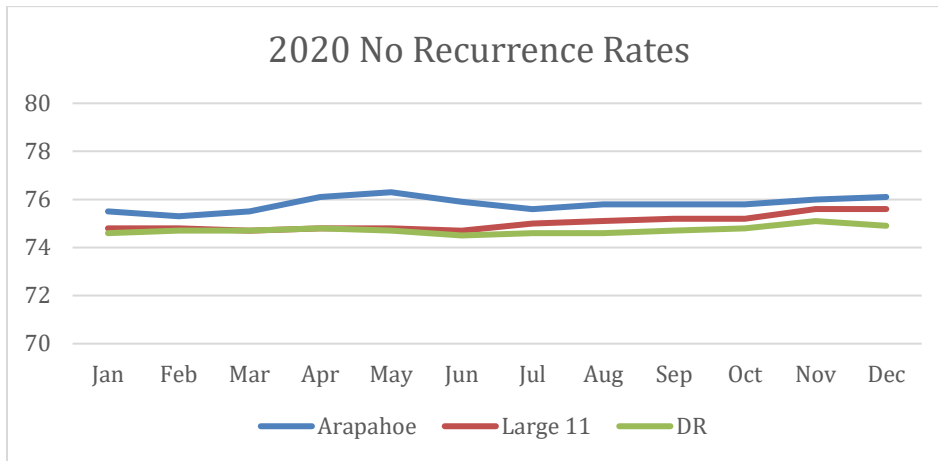


Figure C4: No Recurrence of Abuse Rates - 2021

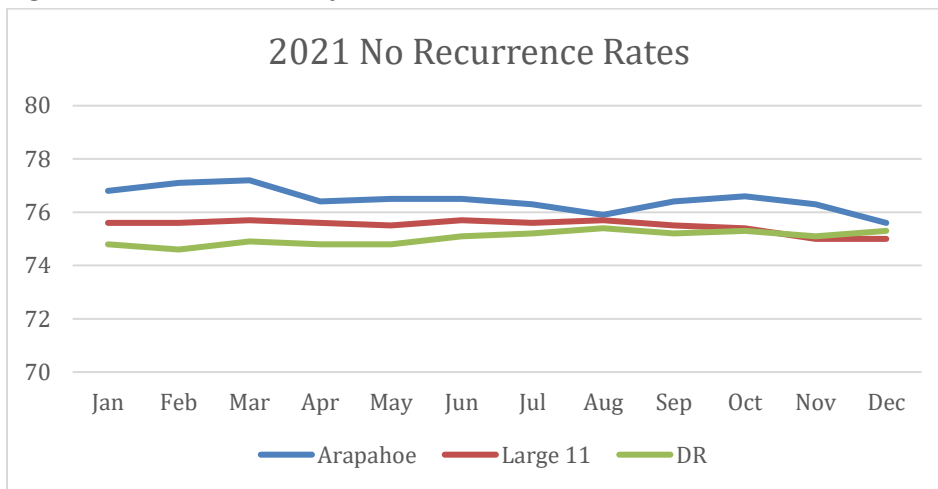
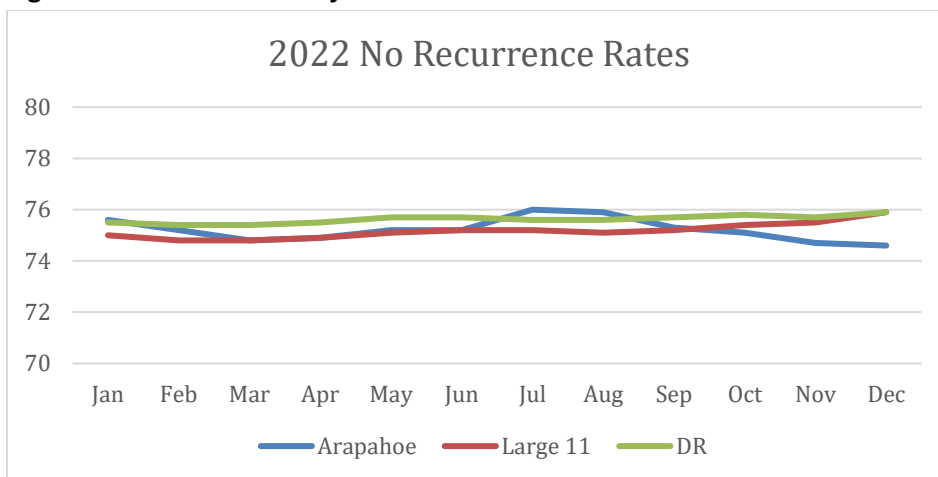


Figure C5: No Recurrence of Abuse Rates - 2022



Appendix D: Colorado Department of Human Services Phase Two: Review of Contacts

Arapahoe County Department of Human Services Review Overview and Results

A former Social Caseworker in Arapahoe County Department of Human Services (ACDHS) was charged in May 2022 with a felony attempt to influence a public servant and misdemeanor false reporting of child abuse after allegedly calling in a known false report of child abuse against her partner's employer at the time of the false report. As a result, Arapahoe County asked the Colorado Department of Human Services to further assess whether other activities of this social caseworker were fraudulent. The CDHS performed an independent review of referrals made by the former social caseworker, as well as a random sample of contacts entered into the Trails system as completed by the social caseworker. Additionally, the CDHS reviewed incidents brought forth through the CHDS complaints process. An additional component of the CDHS engagement with Arapahoe County included a high level safety review of all assessments and permanency cases conducted by this social caseworker during her tenure with Arapahoe County.

As a second phase of the CDHS engagement with Arapahoe County, the CDHS conducted a review to verify contacts on referrals with a referral date of October 1, 2022 through January 10, 2023, that were accepted for assessment and were still open on 1/11/2023 (the date the sample was pulled). This broader review was designed to provide an assessment for systemic concerns for falsification of contacts entered into Trails by Arapahoe County staff.

Review Processes and Results

Review Sample

This review process was designed to verify contacts on open assessments. Open assessments were selected to maximize the potential to reach clients, and minimize the need to drop sampled contacts due to an inability to reach clients.

Referrals with a referral date of October 1, 2022 through January 10, 2023, that were accepted for assessment and were still open on 1/11/2023 (the date the sample was pulled) were identified as the primary universe from which to identify contacts for review. For assessments conducted as a Family Assessment Response, if a FARSP was created - indicating the assessment was no longer open and a case had started – the assessment was dropped. If a worker had entered a request for the assessment to be closed, but it was not yet approved, the assessment was dropped. Because the sample was pulled in advance of the actual review, it was anticipated they would be approved for closure by the time the review started. In total, there were 714 open assessments eligible for review in Arapahoe County. Of those, 667 had contacts.

From those assessments, criteria for eligible contacts included:

- For some FAR assessments, the assessment was linked to an older case. To ensure sampled contacts were associated with the current assessment, only contacts occurring after the referral date were considered for review
- The contact was documented as “Completed,” and
- The contact was not with a child (i.e., an individual less than 18 years of age)

No further filtering of contact type (e.g., email, telephone call, face-to-face, etc.) occurred.

In the 667 assessments with contacts, there were a total of 5,488 contacts. Based on the criteria listed above, before sampling:

- 212 contacts were filtered out because the contact occurred in a School or Institution Visit and only Children/Youth under 18 were identified
- 143 were filtered because the status indicated the contact was "not completed"
- 452 were filtered because the Type was listed as "Face To Face Failed attempt", indicating that a contact was not actually completed

After eliminating these contacts, the total number of contacts in the sample population was 4,681.

Using the software SPSS, a random sample was extracted from the Trails system. Using a 95% confidence level with a 10% interval, a sample size of 95 contacts was determined to be required for review. As it was anticipated that a number of assessments would close between the time the sample was pulled and the beginning of the review, the remainder of the contacts were kept as an oversample. The oversample contacts were organized by the random number that was assigned, and they were used in that order.

The application of this sampling technique means that if the entire population was reviewed, the results would be consistent with the findings of this review 95% of the time (with a margin of error of 10%).

Table 1 (top of next page) shows a comparison of the types of contacts in the population compared to the sample identified for review.

Table 1: Comparison of population and sample contacts

Contact Type	Population		Sample	
	<i>n</i>		<i>n</i>	
Face to Face (Child Care)	9	0.20%		
Face to Face (Client's Residence - Home)	583	12.50%	14	14.70%
Face to Face (Client's Residential-Placement Provider)	8	0.20%		0.00%
Face to Face (School)	42	0.90%	1	1.10%
Letter	10	0.20%		0.00%
Other	92	2.00%	5	5.30%
Face to Face (DSS Office)	40	0.90%		0.00%
Face to Face (Other)	41	0.90%		0.00%
Face to Face (Community)	50	1.10%		0.00%
Face to Face (Court)	5	0.10%		0.00%
Face to Face (Other Residence)	12	0.30%		0.00%
Face to Face (Client's Residential-Facility/Institution)	29	0.60%		0.00%
Voicemail Message	373	8.00%	8	8.40%
FAX	1	0.00%		0.00%
E-mail	839	17.90%	18	18.90%
Telephone Call To	1519	32.50%	30	31.60%
Telephone Call From	482	10.30%	10	10.50%
Video Conference	23	0.50%	1	1.10%
Text	495	10.60%	7	7.40%
Virtual Visitation	1	0.00%		0.00%
Kin Background Check-All Required	27	0.60%	1	1.10%
Total	4681	100.00%	95	100.00%

Review Process

The CDHS review team consisted of 3 staff from the Administrative Review Division. Staff were excused from their normal work duties to participate in this review. Sampled contacts were printed and organized by assessment type (High Risk Assessment and Family Assessment Response), sample type (sample and over-sample), case, contact sequence number, and a unique identifier created for contact. The report also showed the type of contact, date and time of the contact, contact participants, and contact narrative.

ACDHS provided one intake administrator who was partnered with one of the CDHS staff members. This allowed the administrator to have the direct contact with the individuals as part of the overall management of the assessment and direct contact with individuals, while the CDHS staff person was responsible for verification of the sampled contacts.

The review started in ACDHS on Monday, January 30th, 2023. ACDHS staff had previously been briefed on the background, scope, and purpose of the review. The ACDHS administrator and CDHS staff pair reviewed the contacts needing to be verified in order to create a work plan and schedule for this work. CDHS had committed to work around the ACDHS administrator's schedule and responsibilities to make ongoing child safety decisions. ACDHS cleared the administrator's schedule to make them available to focus their time and efforts on this project.

In order to consider a contact verified, the ACDHS administrator and CDHS staff pair looked to confirm both that the contact occurred, and that the individual(s) verified the content (i.e., summary of the contact entered into the Trails system). Contact verification occurred through various processes, often depending on the type of contact and information available at the time of the review. Examples include:

- Emails: The ACDHS administrator worked with ACDHS caseworkers to pull the caseworker emails from the Outlook email system to provide to CDHS staff for review. One of the CDHS staff compared the email records received against those pulled in the sample to try and locate the email. For many emails, the Trails Record of Contact (ROC) note included the date/time stamp from the email (as it was copy and pasted into the ROC note). Other emails appeared to be a typed summary. For the typed summaries, an email was considered verified if the CDHS staff person could locate an email with similar contact on or around the date the contact was listed to have occurred in the Trails ROC note.
- Telephone Calls: The ACDHS administrator and CDHS pair called the individual(s) identified in the contact to verify the telephone call. In instances where nobody answered, an attempt was made to leave a voicemail requesting a return call. Situations that resulted in contacts being dropped from the sample and replaced from the oversample included:
 - Nobody answered the phone call, and a voicemail could not be left. This included voice message systems that had not been setup, or were full and would not accept another message.
 - Voicemails were left, but after several days, no return call was received.

- An individual would answer the call, but indicate that it was an incorrect number (i.e., they were not the person listed in the contact, nor did they know them).
- The telephone call was listed as a call to an agency (e.g., hospital, school, etc.) but did not list a specific individual. If possible, attempts to call the agency were made to determine if they had a phone log that might help identify if a call was made, and to whom, prior to dropping the call.
- No phone number could be located for a listed individual. This included attempts at finding a phone number through other available systems.
- Face-to-face: The ACDHS administrator and CDHS pair called the individual(s) identified in the contact to verify the face-to-face contact. If individuals could not be reached, the contact was dropped and replaced from the oversample. Reasons for not being able to reach an individual(s) were similar to those listed above, under “Telephone Calls.”
- Other: Two contacts were entered under a category of “Other.” These referenced materials being gathered for a meeting, and a referral being made for services. Efforts to verify were made by reaching out to other individuals, when possible, to confirm if activities had occurred (e.g., was a referral for services made). If there was not a way to verify the information, the contact was dropped and replaced.

Additionally, ACDHS made a bilingual supervisor available to assist in any calls that required translation services.

There were three potential categories for each of the contacts:

- Verified: A contact was considered verified if:
 - The individual listed as contacted (e.g., face-to-face or telephone call) was able to confirm that the contact took place, and confirmed information described in the narrative summary of the contact.
 - Emails were considered verified if the specific email matching the exact date and time was located, or an email with the same information summarized was located around the date the contact was listed to have occurred in Trails. For example, some contacts in Trails included the entire email thread copy and pasted into the ROC note. This allowed the specific verification. Other ROC notes were a typed summary of the content of an email. For these, if an email close to the date listed in Trails (i.e., the ROC note entered into Trails was listed as 2/5/2022 but the email found from the county email server was dated 2/4/2022) was located with the same content, this was considered verified.
- Not Verified: The nature of some contacts was such that they could not be definitively confirmed nor refuted. For example, several contacts that were listed as “Completed” were attempts to the home where nobody answered. It was indicated that the worker left a business card in the door. When the individual was contacted, they indicated they did not find a business card in the door. However, it is possible a card was left that fell out, someone else took the card first, etc.

- Denied: A contact was considered denied if the listed individual was reached, and denied the contact type occurred, and/or that the discussion described in the contact did not occur. Additionally, if an email could not be located, it was placed in this category.

Results

A total of 62 contacts needed to be dropped from the sample, and replaced with a contact from the oversample. Table 2, below, shows a breakout of the types of contacts dropped, while Table 3 displays the reasons for dropping contacts from the sample.

Table 2: Contact Types Dropped from Sample

Contact Type	Number Dropped
E-mail	12
Face to Face (Client's Residence - Home)	8
Face to Face (School)	1
Kin Background Check-All Required	1
Other	3
Telephone Call From	8
Telephone Call To	17
Text	4
Voicemail Message	8
Total	62

Table 3: Reasons for Dropping Contacts from Sample.

Reason	Number Dropped
Assessment Closed	52
Unable to contact - could not leave voice mail	2
Contact made by non-ACDHS worker	2
Contact with minor	1
Worker Filter	5
Total	62

During the planning for this review, Arapahoe County made the CDHS aware that, through their own internal processes, that they had recently identified a staff person who falsified contact information in Trails. That staff member had already been terminated from ACDHS and the confirmed falsification was turned over to the District Attorney's Office for prosecution. As ACDHS had already taken proper steps to review assessments conducted by that worker, CDHS dropped any contacts made by that worker. These are the five (5) dropped contacts listed under "Worker Filter" in Table 3.

Replacement contacts were identified by choosing the next randomly selected contact of the same type (e.g., telephone call, face-to-face) from the randomized list of contacts that was associated with an assessment that remained open. All contacts that were dropped were able to be replaced with a contact of a similar type.

Of the 95 contacts reviewed, all 95 were verified as having occurred and the summary of the contact in Trails was supported. As such, there was no evidence of systemic concerns of falsification of contacts.